

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street Providence, RI 02904-2615 401.222,3010

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2009

Filing Period: January 1 - March 1 • Filing Fee: \$50.00° • THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.

\* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(e&d)) is subject to a penalty fee of \$25.00.

000104287	M3 Enterp	M3 Enterprises, Inc.				
1 Street Address Principal Business Office 46 Shun Pike		City Johnston	State RI	<i>Ζip</i> <b>02919</b>		
4 Business Phone Vo. 5. State of Incorporation Rhode Island						
6 Brief Description of the Cha. To own, operate, and r	racter of Business Conduc manage a rubbish d	cted in Rhode Island lisposal and waste company	or for any other lawful	purpose		
	SSES OF THE OFFI	CERS: ("X" BOX FOR ATTA		• •	ATTACHMENTS	
Nover Address 1011 Town Farm Rd.			Street Address 420 Burnt Hill Rd.			
Coventry	State RI	<sup>Z/p</sup> 02816	City Hope	State RI	<sup>Zip</sup> 02831	
Secretary Name Frank H. Macera, Jr.			Treasurer Name Frank H. Macera, Jr.			
Street Address 1011 Town Farm Rd.			Street Address 1011 Town Farm Rd.			
Coventry	State RI	<sup>Zip</sup> 02816	City Coventry	State RI	<sup>Zip</sup> 02816	
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATT Interior Name  None			Director Name			
Novel Achiress			Street Address		<b>E C C C C C C C C C C</b>	
CHY	State	Zip	City	State	2	
Director Name	•••••••		Director Name		<b>E</b> 6550	
Street Address			Street Address		: 06	
CHr	State	Zip	City	State	Zip	
9. SHARES AUTHORIZE	ab '	· ·		I D <i>("X" BOX FOR ATTACI</i> ECTION <u>MUST</u> BE COMPLETED		
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.			Number of Shares	Class/Series	Par Value	
			1,000	Common	No	
Th						
this report must be exect	uted on behalf of the	e corporation by an authorize corporation by the receiver of	d representative. If the or trustee.	corporation is in the hand	s of a receiver or trustee.	
		FILED				
			Under penalty of	perjury, I declare and affirm (	that I have examined this report	
File Date		AUG 24 200	contained herein	are true and correct.	tements, and that all statement	
Check No.		129-97	Signalure Signalure Frank H. M.	acera. Jr.	Date	
By:		_\	Print or Type Nam			
FOR SECRETARY O	F STATE USE ONLY		President Title			