

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street Providence, RI 02904-2615 401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2009 401.222.30 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.

1. Corporate 11) No. (45220	Schweg le	+ Sons Hum	bing + Heatin	q. Inc	
3. Street Address Poncipal Business Office 22 Druce Dr			No Smithfield	State PI	02896
4. Business Phone No. 401-766-5	/c_V	5. State of Incorporation		11.70	
6. Bytes Description of the Character of		bode Sand	tractor		
7. NAMES AND ADDRESSES	OF THE OFFICERS:	Jun C	,	EES BEFORE USING A	ATTACHMENTS
President Name			Vice President Name		
Street Address			Street Address		
22 Drnce Dr. Giv 1 State Zip			: City State Zip		
No smithtield	RZ	02896	- City	Situe	Zip
Secretaŋ [,] Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. NAMES AND ADDRESSES	OF THE DIRECTOR	 S:	: FACHMENT) □ FILL IN SPA	ACES BEFORE USING	ATTACHMENTS
Director Name Director Name					
Street Address			Street Address		
22 Druce B	State	20	City	State	Zip
No Smithtield	16.7	02896	i conj	Jiene	2.42
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED	1	I	10. SHARES ISSUED ("X" BOX FOR ATTACHMENT)		
700			ISSUED SHARES — THIS SECTION Number of Shares	N MUST BE COMPLETED Class/Series	Par Value
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.			,		No
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	1 1 10 0			<u> </u>	
This report must be executed this report must be executed				ration is in the hands	of a receiver or trustee,
		1			-
			Under penalty of perior	v. I declare and affirm the	nat I have examined this repor
	<u> </u>	7	including any accompa	nyjng schedules and stat	tements, and that all statemen
File DateFILED			commined herein are true find correct. Ullean France 10609		
Check No. OCT 0 8 2009 SE: E Hd 8-130 0107 William & Schwag Date					
Prints or Type Name					
FOR SECRETARY OF ST.	319T		Wesiden	4	
TOR DECEMBRICATION OF STA		Title		Form 630 Rev. 08/08	