



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2611
401.222.3011

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(c)(4)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. **529** 2. Name of Corporation **AIR AND ENERGY ENGINEERING, INC.**

3. Street Address Principal Business Office **124 SUMMER STREET** City **PROVIDENCE** State **RI** Zip **02903**

4. Business Phone No. **401-861-0202** 5. State of Incorporation **RHODE ISLAND**

6. Brief Description of the Character of Business Conducted in Rhode Island
HVAC CONSTRUCTORS

7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS

President Name **EDWARD A. TOMOLILLO, JR.** Vice President Name **EDWARD A. TOMOLILLO, SR.**

Street Address **124 SUMMER STREET** Street Address **124 SUMMER STREET**

City **PROVIDENCE** State **RI** Zip **02903** City **PROVIDENCE** State **RI** Zip **02903**

Secretary Name **LUANN NAVACH** Treasurer Name **LUANN NAVACH**

Street Address **124 SUMMER STREET** Street Address **124 SUMMER STREET**

City **PROVIDENCE** State **RI** Zip **02903** City **PROVIDENCE** State **RI** Zip **02903**

8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name **EDWARD A. TOMOLILLO, JR.** Director Name **LUANN NAVACH**

Street Address **124 SUMMER STREET** Street Address **124 SUMMER STREET**

City **PROVIDENCE** State **RI** Zip **02903** City **PROVIDENCE** State **RI** Zip **02903**

Director Name Director Name

Street Address Street Address

City City State State Zip Zip

9. SHARES AUTHORIZED
1000 MO 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.

10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐

ISSUED SHARES - THIS SECTION MUST BE COMPLETED

Number of Shares	Class/Series	Par Value
500	COMMON	NO PAR

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

FILED

DEC 03 2009

File Date _____
By **[Signature]**
Check No. _____
By **105315**

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature **[Signature]** Date **10/31/09**

EDWARD A. TOMOLILLO, JR.

Print or Type Name

PRESIDENT

Title