

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

## 2009 PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

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(cc/d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 132984	2. Name of Corp. STAMPED	2. Name of Corporation STAMPED-CONCRETE, INC.				
3. Street Address Principal Business Office 10 Leonard Drive			Cuy Harrisville	State RI	<sup>Zip</sup> 02830	
4. Business Phone No. 5. State of Incorporation Rhode Island			.,,	-		
6. Brief Description of the Char	acter of Business Conduc	ted in Rhode Island		3,00		
7. NAMES AND ADDRES President Name	SSES OF THE OFFI	CERS: ("X" BOX FOR ATTA	CHMENT) TILL IN Vice President Name	SPACES BEFORE USING	ATTACHMENTS	
Michael Pezza			Michael Pezza			
Street Address 10 Leonard Drive			Street Address 10 Leonard Drive			
<sub>Сиу</sub> Harrisville	State RI	<sup>Zip</sup> <b>02830</b>	City Harrisville	State RI	<sup>Zip</sup> 02830	
Secretary Name Michael Pezza			Treasurer Name Michael Pezza			
Street Address 10 Leonard Drive			Street Address 10 Leonard Drive			
City Harrisville	State RI	<sup>Zip</sup> 02830	City Harrisville	State R1	<sup>Zψ</sup> 02830 <b>€</b> ,	
8. NAMES AND ADDRES  Director Name	SSES OF THE DIRE	CTORS: ("X" BOX FOR ATT	ACHMENT) TILL I	IN SPACES BEFORE USIN		
Enector Name			<u> </u>		CRE ORP	
Street Address			Street Address		ORAN CE	
Cuy	State	Zip	City	State	Zip COCC	
Director Name			Director Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
9. SHARES AUTHORIZE	D I	ı		D <i>("X" BOX FOR ATTAC</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	
			300	Common	no par value	
		e corporation by an authorize		corporation is in the hand	s of a receiver or trustee,	
_		·	or trustee.			
		FILED				
		JAN 04 2010	including any ac	companying schedules and st	that I have examined this report atements, and that all statements	
File Date		Bylon		are true and correct.		
Check No.		129-10736	Signature	B	Date	
Check Ho.		T/2//0/34	Michael Pe			
Ву:			Print or Type Name	ne		
FOR SECRETARY O	OF STATE USE ONLY		Title			
	<del>_</del>				Form 630 Rev. 08/08	