



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 02904-2615
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2010

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

1. Corporate ID No. 000114671		2. Name of Corporation EQUIPMENT SERVICE CORPORATION USA					
3. Street Address Principal Business Office 685 SHIPPEETOWN ROAD		City EAST GREENWICH	State RI	Zip 02818			
4. Business Phone No. 401-884-7534		5. State of Incorporation RI					
6. Brief Description of the Character of Business Conducted in Rhode Island							
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS							
President Name DUNCAN CAREW		Vice President Name DUNCAN CAREW					
Street Address 685 SHIPPEETOWN ROAD		Street Address 685 SHIPPEETOWN ROAD					
City EAST GREENWICH	State RI	Zip 02818	City EAST GREENWICH	State RI	Zip 02818		
Secretary Name DUNCAN CAREW		Treasurer Name DUNCAN CAREW					
Street Address 685 SHIPPEETOWN ROAD		Street Address 685 SHIPPEETOWN ROAD					
City EAST GREENWICH	State RI	Zip 02818	City EAST GREENWICH	State RI	Zip 02818		
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS							
Director Name NONE		Director Name NONE					
Street Address		Street Address					
City	State	Zip	City	State	Zip		
Director Name NONE		Director Name NONE					
Street Address		Street Address					
City	State	Zip	City	State	Zip		
9. SHARES AUTHORIZED 8000					10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐		
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.					ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
					Number of Shares NONE	Class/Series	Par Value

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.

File Date	1-04-2010
Check No.	12744
By:	MNC
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: Duncan Carew Date: 12-31-09
Print or Type Name: DUNCAN CAREW
Title: PRESIDENT