

subject to a penalty fee of \$25.00.

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(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&d)) is the property of the composition of the composi

| 1. Corporate ID No. 18478 LAWRENCE & BROOKS INCORPORATED | | | |
|---|--|--|---|
| 3. Street Address Principal Business Office /2 SHELDON STREET | PROVIDENCE_ | State R | 02906 |
| 4. Business Phone No. 5. State of Incorporation RHODE | TSLAND | | |
| 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 | Vice President Name | | , |
| STEVEN G. (RIEDMAN_ | Street Address | | |
| Street Address 25 POWEY ST | IS MARGRAVE AVE. | | |
| City Prov. State 29 240 3 | City Pro V | State R 9 | 0 290 b |
| SUSAN A. TRIEDMAN | Treasurer Name Heroperate | TRIEDMA |) N |
| Street Address ARARAME AVE. | Street Address 15 MARGRAVE AVE. | | |
| Cuy Propy State R9 02906 | CUPPYDV | State 2 | 1210 B |
| 8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Director Name Director Name | | | |
| SUSAN A. TRIEDMAN | Herbert L. | TRIEDMI | <u> </u> |
| Street Address 15 MARGRAVE PVE, | Street Address 15 MARGRAVE AVE | | |
| Prov State R9 C2906 | CILI PLAN | State | 21 2406 |
| Director Name Director Name | | | |
| - Na Ne - | Street Address | | |
| Street Address | N C | ONE- | <u> </u> |
| City NONE - State - NONE - NONE - | CIO NONE - | State -NONE | - NONE- |
| MIN = 1-10000 1-14011 | 10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) | | |
| 9. SHARES AUTHORIZED | | | |
| 9. SHARES AUTHORIZED 300 -CLASS B | ISSUED SHARES — THIS SECTION | N MUST BE COMPLETED | |
| 9. SHARES AUTHORIZED 300 -CLASS B This information is currently of record in the Office of the Secretary of | ISSUED SHARES — THIS SECTION Number of Shares | | AENT) Par Value |
| 9. SHARES AUTHORIZED 300 -CLASS A 300 -CLASS B | ISSUED SHARES — THIS SECTION | N MUST BE COMPLETED Class/Series | MENT) |
| 9. SHARES AUTHORIZED 300 -CLASS A 300 -CLASS B This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of | ISSUED SHARES — THIS SECTION Number of Shares | N MUST BE COMPLETED Class/Series | AENT) [|
| 9. SHARES AUTHORIZED 300 -CLASS A 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. This report must be executed on behalf of the corporation by an authorize | ISSUED SHARES — THIS SECTION Number of Shares ed representative. If the corpo | N MUST BE COMPLETED Class/Series A | Par Value NONE |
| 9. SHARES AUTHORIZED 300 -CLASS A 300 -CLASS B This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of | ISSUED SHARES — THIS SECTION Number of Shares ed representative. If the corpo | N MUST BE COMPLETED Class/Series A | Par Value NONE |
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