

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(còrd)) is

subject to a penalty fee of \$2					
I. Corporate ID No. 000051558	2. Name of Corpo Restivo's H	eating and Air Conditionii	ng, Ltd.	-	
3. Street Address Principal Business Office 295 Scituate Avenue			Johnston	State RI	<i>zip</i> 02919
4. Business Phone No. 5. State of Incorporation 401-273-9849 Rhode Island					
7. NAMES AND ADD	Character of Business Conductor	ted in Rhode Island CERS: ("X" BOX FOR ATTA	CHMENT)	ACES BEFORE USING	ATTACHMENTS
President Name John R. Restivo, Jr.			John R. Restivo, Jr.		
Street Address 50 Crest Drive			Street Address 50 Crest Drive		
City Cranston	State RI	_{Хір} 02921	Cin: Cranston	State RI	^{Ζiρ} 02921
Secretary Name Jennifer Restivo			Treasurer Name John R. Restivo, Jr.		
Street Address 50 Crest Drive			Street Address 50 Crest Drive		
Ciny Cranston	State RI	Zip 02921	City Cranston	State RI	^{Zip} 02921
8. NAMES AND ADD Director Name NONE	PRESSES OF THE DIRE	CTORS: ("X" BOX FOR AT	TACHMENT) T FILL IN S Director Name NONE	SPACES BEFORE USI	NG ATTACHMENTS
Street Address			Street Address		
Сйу	State	Zifi	City	State	Zip
Director Name	J		Director Name		,
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
This information is currently of record in the Office of the Secretary of			No. of Change	Class/Series	Par Value
State. Changes require an additional filing. See Section 9 of			300		
instruction sheet.					
This report must be	executed on behalf of t	he corporation by an authoriz	zed representative. If the co	orporation is in the har	nds of a receiver or trustee
this report must be o	executed on behalf of the	e corporation by the receive	r or trustee.		
FI FI	LED			npanying schedules and	m that I have examined this re statements, and that all staten
The Dute	19 2010		Signature		7 2010 Dute
Du 5	10 CUN		John R. Re	estivo, Jr.	
By: Dy 3	23133	<u> </u>	President		
FOR SECRET	ARY OF STATE USE ONLY		Title		Form 630 Rev. 08/0