RI SOS Filing Number: 201057198580 Date: 01/21/2010 4:00 PM

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(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 subject to a penalty fee of $25.00.*

1. Corporate ID No.	2. Name of Corporation			
119867	DGP-Miles Insurance Agency, Inc.			
3. Street Address Principal Business Office		City	State	Zip
3-7 School Street		Taunton	MA	02780
4. Business Phone No.	5. State of Incorporation			
508-824-8967	Massachusetts			
6. Brief Description of the Character of Business Conducted in Rhode Island				
Selling insurance				

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

President Name			Vice President Name		
David G. Pietro			None		
Street Address			Street Address		
3 School Street					
City	State	Zip	City	State	Zip
Taunton	MA	02780			
Secretary Name			Treasurer Name		
David G. Pietro			David G. Pietro		
Street Address			Street Address		
3 School Street			3 School Street		
City	State	Zip	City	State	Zip
Taunton	MA	02780	Taunton	MA	02780

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

Director Name			Director Name		
David G. Pietro					
Street Address			Street Address		
3 School Street					
City	State	Zip	City	State	Zip
Taunton	MA	02780			
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip

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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 State. Changes require an additional filing. See Section 9 of instruction sheet.	Number of Shares	Class/Series	Par Value
	782	Common	No par
	THIS SECTION MUST BE COMPLETED		

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.

[redacted]

FILED
JAN 21 2010
By [signature]
108798

[redacted]

File Date _____
Check No. _____
By: _____
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] 1/11/10
Signature *Date*

David G. Pietro
Print or Type Name

President
Title

Form 630 Rev. 08/08

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