



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 02904-2611
401.222.3044

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		
37980	AAA Professional Lawn Care, Inc.		
3. Street Address Principal Business Office	City	State	Zip
17 Deer View Road	Johnston	RI	02919
4. Business Phone No.	5. State of Incorporation		
401-944-8717	Rhode Island		

6. Brief Description of the Character of Business Conducted in Rhode Island

Landscaping

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

President Name			Vice President Name		
Anthony Caruso			Anthony Caruso		
Street Address			Street Address		
17 Deer View Road			17 Deer View Road		
City	State	Zip	City	State	Zip
Johnston	RI	02919	Johnston	RI	02919
Secretary Name			Treasurer Name		
Anthony Caruso			Anthony Caruso		
Street Address			Street Address		
17 Deer View Road			17 Deer View Road		
City	State	Zip	City	State	Zip
Johnston	RI	02919	Johnston	RI	02919

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

Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip

9. SHARES AUTHORIZED

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.

10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐

ISSUED SHARES — THIS SECTION MUST BE COMPLETED

Number of Shares	Class/Series	Par Value
100	Common	No Par

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	FILED
Check No.	JAN 21 2010
By	7104
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	Date
Anthony Caruso	1-15-10
President	
Title	