



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.<br><b>116390</b>  |                    | 2. Name of Corporation<br><b>R &amp; N Construction, Inc.</b> |   |                               |                            |
| 3. Street Address Principal Business Office<br><b>2 Lincoln Drive</b>   |                    |   | City<br><b>Johnston</b>   | State<br><b>RI</b>            | Zip<br><b>02919</b>        |
| 4. Business Phone No.<br><b>(401) 524-1928</b>  |                    | 5. State of Incorporation<br><b>Rhode Island</b>              |   |                               |                            |
| 6. Brief Description of the Character of Business Conducted in Rhode Island <b>To engage in the construction of residential and commercial structures including but not limited to framing and general contracting.</b> |                    |   |   |                               |                            |
| 7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS   |                    |   |   |                               |                            |
| President Name<br><b>Nina Joseph</b>  |                    |   | Vice President Name<br><b>Nina Joseph</b>                           |                               |                            |
| Street Address<br><b>2 Lincoln Drive</b>  |                    |   | Street Address<br><b>2 Lincoln Drive</b>                            |                               |                            |
| City<br><b>Johnston</b>   | State<br><b>RI</b> | Zip<br><b>02919</b>   | City<br><b>Johnston</b>   | State<br><b>RI</b>            | Zip<br><b>02919</b>        |
| Secretary Name<br><b>Nina Joseph</b>  |                    |   | Treasurer Name<br><b>Nina Joseph</b>                                |                               |                            |
| Street Address<br><b>2 Lincoln Drive</b>  |                    |   | Street Address<br><b>2 Lincoln Drive</b>                            |                               |                            |
| City<br><b>Johnston</b>   | State<br><b>RI</b> | Zip<br><b>02919</b>   | City<br><b>Johnston</b>   | State<br><b>RI</b>            | Zip<br><b>02919</b>        |
| 8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS  |                    |   |   |                               |                            |
| Director Name<br><b>Nina Joseph</b>   |                    |   | Director Name   |                               |                            |
| Street Address<br><b>2 Lincoln Drive</b>  |                    |   | Street Address  |                               |                            |
| City<br><b>Johnston</b>   | State<br><b>RI</b> | Zip<br><b>02919</b>   | City  | State                         | Zip                        |
| Director Name   |                    |   | Director Name   |                               |                            |
| Street Address  |                    |   | Street Address  |                               |                            |
| City  | State              | Zip   | City  | State                         | Zip                        |
| 9. SHARES AUTHORIZED<br><b>1000 Common No Par</b>   |                    |   | 10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> |                               |                            |
| 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<br><b>200</b>                                      | Class/Series<br><b>Common</b> | Par Value<br><b>No Par</b> |
|   |                    |   |   |                               |                            |

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                       | <u>2-18-2010</u> |
| Check No.                       | <u>5249</u>      |
| By:                             | <u>MNC</u>       |
| 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 Nina Joseph Date 2/12/10  
**Nina Joseph**  
Print or Type Name  
**President**  
Title