

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. 106095	2. Name of Corporation Master Painters	2. Name of Corporation Master Painters, Inc.				
3. Street Address Principal Business Office 107 Hillwood Street			City Cranston	State RI	21p 02920	
4. Business Phone No. 5. State of Incorporation Phode Island						
6. Brief Description of the Characte To own, operate, maintain	and carryon the busi	ness of a painting contr				
7. NAMES AND ADDRESSE	S OF THE OFFICERS	: ("X" BOX FOR ATTA	ignition from the control of the con	SPACES BEFORE USING	ATTACHMENTS	
President Name			Vice President Name			
Ronald W. Rotondo			Denise L. Rotondo			
Street Address 107 Hillwood Street			Street Address 107 Hillwood Street			
^{City} Cranston	State RI	^{Ztp} 02920	City Cranston	State RI	02920	
Secretary Name Ronald W. Rotondo			Treasurer Name Denise L. Rotondo			
Street Address 107 Hillwood Street			Street Address 107 Hillwood Street			
City Cranston	State RI	<i>Zip</i> 02920	City Cranston	State RI	^{Zip} 02920	
8. NAMES AND ADDRESSE Director Name Ronald W. Rotondo	S OF THE DIRECTOR	IS: ("X" BOX FOR ATT	ACHMENT) TILL II Director Name	n spaces before usin	G ATTACHMENTS	
Street Address			Street Address			
107 Hillwood Street						
City	State	Zip	City	State	Zip	
Cranston	JR!	02920				
Director Name			Director Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
9. SHARES AUTHORIZED			Millimitter of the Control of the Co	(<i>"X" BOX FOR ATTAC</i> CTION <u>MUST</u> 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/Sories	Par Value	
			200	common	none	
			1985 805		area of	
This report must be executed		•	•	corporation is in the hand	s of a receiver or trustee,	

File Date	HLED	
Check IFEB	172010	
By By FOR	SECRETARY OF STAT	E USE ONLY

Under penalty of perjury, I declare and a including any accompanying schedules a	• •
funder w Kolorch	× 2//5/10
Signature	Bate 2
Ronald W. Rotondo	•
Print or Type Name	
President	
cm 1	