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			
84162	The Mortgage Giant, Inc.			
3. Street Address Principal Business Office		City	State	Zip
16 County Street		Attleboro	MA	02703
4. Business Phone No.	5. State of Incorporation			
401-273-4700	RI			

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

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

President Name			Vice President Name		
William J. Griffin			William J. Griffin		
Street Address			Street Address		
16 County Street			16 County Street		
City	State	Zip	City	State	Zip
Attleboro	MA	02703	Attleboro	MA	02703
Secretary Name			Treasurer Name		
D. Joseph D'Amico, Esq.			William J. Griffin		
Street Address			Street Address		
728 Valley Street			16 County Street		
City	State	Zip	City	State	Zip
Providence	RI	02908	Attleboro	MA	02703

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

Director Name			Director Name		
William J. Griffin					
Street Address			Street Address		
16 County Street					
City	State	Zip	City	State	Zip
Attleboro	MA	02703			
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip

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RECEIVED
SECRETARY OF STATE
CORPORATIONS DIVISION

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
0		

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 C
File Date
Check No. FEB 19 2010
By: BY 111569
FOR SECRETARY OF STATE USE ONLY

[redacted]

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
Date

William J. Griffin
Print or Type Name

President
Title

Form 630 Rev. 08/08