

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

1. Corporate ID No. 148917		2. Name of Corporation R.A. Giovanetti & Assoc. Consulting Engineers, Inc.				
3. Street Address Principal Business Office 100 Saint Johns Lane			City Mullica Hill	State NJ	Zip 08062	
4. Business Phone No. 5. State of Incorporal New Jersey			on	***************************************		
6. Brief Description of the Co Perform consulting 6	engineering.					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR A President Name Richard A. Giovanetti			Vice President Name  Mark S. Shulman			
Street Address 370 Reed Road, Suite 201			Street Address 370 Reed Road, Suite 201			
City Broomall	State PA	<sup>Zip</sup> 19008	<i>Gio</i> Broomall	State PA	7ip 19008	
Secretary Name Mark S. Shulman			Treasurer Name Connie M. Giovanetti			
Street Address 370 Reed Road, Suite 201			Street Address 370 Reed Road, Suite 201			
City Broomall	State PA	<sup>Zip</sup> 19008	City Broomall	State PA	<i>Zip</i> 19008	
Mark S. Shulman	RESSES OF THE DIRE	CTORS: ("X" BOX FOR	ATTACHMENT)		G ATTACHMENTS	
Street Address 370 Reed Road, Suite 201			Street Address 370 Reed Road, Suite 201			
City Broomall	State PA	<i>Zip</i> 19008	сцу Broomall	State PA	<i>Zip</i> 19008	
Director Name			Director Name		******************************	
Street Address			Street Address			
City	State	Zip	City	State	Zip	
9. SHARES AUTHORIZED SHARES		ATTACHMENT) [		("X" BOX FOR ATTACE CTION MUST BE COMPLETED	_	
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value	
1,000 Comm \$1.00 Par Value			612	Common	\$1.00	
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File Date FEB 2 2 2010	
Check No 3 \ 5 \ 8 \ 9	
Ву:	
FOR SECRETARY OF STATE USE ONLY	

Under penalty of perjury, I declare and affi including any accompanying schedules an contained herein are true and correct.	transhat I have examined this report, a statements, and that all statements
Signature /	Date
Richard A. Giovanetti	
Print or Type Name	
President	
Title	Form 630 Rev. 12/06