

A. Ralpb Mollis, Secretary of State Corporations Division

148 W. River Street

Providence, RI 02904-2615 401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR <u>2010</u>

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(e&d)) is

| subject to a penalty fee of \$25.00. | | | |
|---|---------------------------|--|------------------|
| 1. Corporate ID No. 2. Name | of Corporation | · | |
| 131452 Cons | struction Proform | rance, Inc. | |
| 3. Street Address Principal Business Office | | City State | Zip |
| 57 Prispect Hill Av | e | West Warwick RI | 02893 |
| 4. Business Phone No. | 5. State of Incorporati | on | |
| (401) 821 -2318 | Rhode Isl | and | |
| 6. Brief Description of the Character of Business | Conducted in Rhode Island | | |
| (onstruction-Framing, | insulation, drywali | I and acoustical ceilings | |
| 7. NAMES AND ADDRESSES OF ÆHE | OFFICERS: ("X" BOX FOR A | <i>TTACHMENT)</i> 🗍 FILL IN SPACES BEFORE US | SING ATTACHMENTS |
| President Name | | Vice President Name | |
| Maria Rodriauez | | Ernesto Estrada | |
| Street Address | | Street Address | |
| 59 Prospect Hill Av | l'e | 59 Prospect Hill Ave. | |
| CHY West Namick RI | 02893 | City State West Warwick R1 | Zip 02893 |
| Secretary Name | | Treasurer Name | |
| | | | |
| Street Address | | Street Address | |

State City State Zip 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 State Zip City Zip Director Name Director Name Street Address Street Address State City Ζip State 7.ip 9. SHARES AUTHORIZED 10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ISSUED SHARES — THIS SECTION $\underline{\text{MUST}}$ BE COMPLETED Number of Shares Class/Series Par Value This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of 1.0D instruction sheet.

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.

| | FILED |
|-----------|---------------------------------|
| File Date | 552 A F 0000 |
| Check No. | FEB 25 2010 |
| By: | BN 4055 |
| F | 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 |
| cogtained herein are true and correct. |
| Signature 2/8/1D |
| |
| Maria Radiiguez |
| Print or Type Name |
| Print or Type Name J |
| Title |