

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(e&d)) is subject to a penalty fee of \$25.00.

| 1. Corporate ID No. 18923 | 2. Name of Corporation REMY PLUMBING & HEATING, INC. | | | | |
|--|--|-----------------------------|---|-----------------------------|--|
| 3. Street Address Principal Business Office 133 Old Tower Hill Road, Ste. 1 | | ^{Cin} Wakefield | State RI | ^{Ζίρ} 02879 | |
| 4. Business Phone No 789-0217 5. State of Incorporation Rhode Island | | | | | |
| 6. Brief Description of the Character of To carry on a general plumb | | | | | |
| 7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTA- President Name Brian Remy | | | CHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Vice President Name Janine Remy | | |
| Street Address 8 Laurel Lane | | | Strong stildpass 8 Laurel Lane | | |
| City Warren | State RI | ^{Zip} 02885 | City Warren | State RI | ^{Ζip} 02885 |
| Secretary Name Janine Remy | | | Treasurer Name Brian Remy | | |
| Street Address 8 Laurel Lane | | | Street Address 8 Laurel Lane | | |
| Warren | State RI | ^{Ζψ} 02885 | City Warren | State RI | ^{Zip} 02885 |
| 8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATT Director Name Brian Remy | | | ACHMENT) THE FILL IN SPACES BEFORE USING ATTACHMENTS Director Name Janine Remy | | |
| Street Address 8 Laurel Lane | | | Street Address 8 Laurel Lane | | |
| City Warren Director Name | State RI | 2ip 02885 | City Warren Director Name | State RI | Ziμ 02885 |
| Street Address | | | Street Address | | |
| City | State | Zip | City | State | Zip |
| 9. SHARES AUTHORIZED | | | 10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ISSUED SHARES — THIS SECTION MUST 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/Series | Par Value |
| | | | 1,000 | Common | No Par |
| This report must be executed this report must be executed or | | | or trustee. Under penalty of pe | rjury, I declare and affirm | that I have examined this repor |
| File Date 3 1 9 1 Check No. 159 | 010 73 14 | | including any according to the contained herein and signature Brian Remy Print or Type Name President | | atements, and that all statemen Japan Date Date |
| FOR SECRETARY OF STATE USE ONLY | | | Title | | Form 630 Rev 08/08 |