



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. 505119		2. Name of Corporation Ocean State Services Corporation			
3. Street Address Principal Business Office 57 North Main Street			City Fall River	State MA	Zip 02720
4. Business Phone No. 508-369-2508		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island Marketing					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Daniel Petronelli			Vice President Name Daniel Petronelli		
Street Address 57 North Main Street			Street Address 57 North Main Street		
City Fall River	State MA	Zip 02720	City Fall River	State MA	Zip 02720
Secretary Name Daniel Petronelli			Treasurer Name Daniel Petronelli		
Street Address 57 North Main Street			Street Address 57 North Main Street		
City Fall River	State MA	Zip 02720	City Fall River	State MA	Zip 02720
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Daniel Petronelli			Director Name		
Street Address 57 North Main Street			Street Address		
City Fall River	State MA	Zip 02720	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
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.			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
			Number of Shares 74,000.00	Class/Series Common	Par Value .01

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.

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: Daniel Petronelli Date: 2-26-10

Print or Type Name: Daniel Petronelli

Owner

Title

File Date: **FILED**  
Check No: **MAR 22 2010**  
By: **4/30**  
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