



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 2011

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. 24648		2. Name of Corporation Statewide Engineering & Construction Co., Inc.			
3. Street Address Principal Business Office 101 Morgan St.			City Fall River	State MA	Zip 02721
4. Business Phone No. (508) 679-8846		5. State of Incorporation Massachusetts			
6. Brief Description of the Character of Business Conducted in Rhode Island general building, construction					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Abilio Almeida			Vice President Name None		
Street Address 35 Sunset Dr.			Street Address		
City Somerset	State MA	Zip 02726	City	State	Zip
Secretary Name Edite Almeida			Treasurer Name Edite Almeida		
Street Address 35 Sunset Dr.			Street Address 35 Sunset Dr.		
City Somerset	State MA	Zip 02726	City Somerset	State MA	Zip 02726
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Abilio Almeida			Director Name None		
Street Address 35 Sunset Dr.			Street Address		
City Somerset	State MA	Zip 02726	City	State	Zip
Director Name None			Director Name None		
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 60	Class/Series Common	Par Value No Par

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: JAN 19 2011

Check No. _____

By: iv 10916

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 contained herein are true and correct.

Abilio Almeida 1-10-11
Signature Date

Abilio Almeida
Print or Type Name
President
Title