

FOR SECRETARY OF STATE USE ONLY

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.I. 7-1.2-1501(e) each corporation filling as refusing to file its report within thin (20) law of the time contributed by law (B.I.G.I. 7-1-2-1501).

1. Corporate ID No. 147118	2. Name of Con East Bay N	2. Name of Corporation East Bay Metal Building Erectors, Inc.				
3. Street Address Principal Business Office 25 Kinnicutt Avenue			City Warren	State RI	Zip 02885	
4. Business Phone No. 5. State of Incorporation Rhode Island		, vanon		102003		
6. Brief Description of the CL	paracter of Business Condu	cted in Rhode Island				
To engage in the bus	•	-	C = = = = = = = = = = = = = = = = = = =	CDA CDC PROPE VICTOR		
resident Name	LESSES OF THE OFF	CERS: ("X" BOX FOR ATTA	: Vice President Name	SPACES BEFORE USING	ATTACHMENTS	
Frank Petty, Sr.			Frank Petty, Sr.			
Street Address 25 Kinnicutt Avenue			Street Address 25 Kinnicutt Avenue			
ony Warren	State RI	^{Zip} 02885	City Warren	State RI	^{Zip} 02885	
Secretary Name Frank Petty, Sr.			Treasurer Name Frank Petty, Sr.			
Street Address 25 Kinnicutt Avenue			Street Address 25 Kinnicutt Avenue			
_{City} Warren	State RI	^{Zip} 02885	City Warren	State RI	^{Zip} 02885	
	ESSES OF THE DIRE	ECTORS: ("X" BOX FOR ATT	_	N SPACES BEFORE USIN	IG ATTACHMENTS	
Frank Petty, Sr.			Director Name	·		
treet Address			Street Address .			
5 Kinnicutt Avenue	9				•	
City [,]	State	Zip	City	State	Zip	
<i>N</i> arren	RI	02885	***************************************	***************************************		
Pirector Name			Director Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
. SHARES AUTHORIZ	ZED [: 10. SHARES ISSUED	 ("X" BOX FOR ATTAC	 <i>HMENT</i>) □	
·			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	
			100	Common	No par	
This report must be ex-	ecuted on behalf of th	ne corporation by an authorize	d representative. If the	cornoration is in the head	a of a resolver or truck	
his report must be exc	cuted on behalf of the	e corporation by the receiver	or trustee.	corporation is in the hand	is of a receiver of truste	
			Under penalty of p	perjury, I declare and affirm	that I have examined this	
				ompanying schedules and sta are true and correct.	atements, and that all state	
Tile Date	•		Land	1 post 0	1-29-11	
JAI	N 3 1 2011		Signature	- my - r	Date	
Check No. BV	MMCI		Frank Petty	. Sr.		
· • • • • • • • • • • • • • • • • • • •	1100	<u> </u>	Print or Type Name			
By:			President			

Title