



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. 1511		2. Name of Corporation Atlantic Abatement Corp. of Rhode Island			
3. Street Address Principal Business Office 120 Manton Ave		City Prov.,	State RI	Zip 02909	
4. Business Phone No. 401-351-9000		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island Asbestos Abatement, processing, manufacturing, buying, develop, improv. in					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Howard W. Brynes		Vice President Name Keith M. Brynes real est.			
Street Address 2008 SW 6th Ave		Street Address 51 Overlook Drive			
City Boynton Beach	State FL	Zip 33426	City Warwick	State RI	Zip 02818
Secretary Name Keith M. Brynes		Treasurer Name Howard W. Brynes			
Street Address 51 Overlook Drive		Street Address 2008 SW 6th Ave.			
City Warwick	State RI	Zip 02818	City Boynton Beach	State FL	Zip 33426
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Howard W. Brynes		Director Name Keith M. Brynes			
Street Address 2008 SW 6th Ave		Street Address 51 Overlook Drive			
City Boynton Beach	State FL	Zip 33426	City Warwick	State RI	Zip 02818
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"/>					
ISSUED SHARES — THIS SECTION MUST BE COMPLETED					
Number of Shares 100		Class/Series Common		Par Value No Par	
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.					

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 \_\_\_\_\_ Date \_\_\_\_\_  
Howard W. Brynes, President  
Print or Type Name  
President  
Title

File Date **FILED**  
Check No. **FEB 07 2011**  
By: **1164**  
BY: FOR SECRETARY OF STATE USE ONLY