



**State of Rhode Island and Providence Plantations
Office of the Secretary of State**

Fee: \$50.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Business Corporation
Annual Report**

Filing Period: January 1 - March 1

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.

ANNUAL REPORT YEAR: 2011

1. Corporate ID No. 000083241

2. Name of Corporation SynergyOne Solutions, Inc.

3. Street Address Principal Business Office:

No. and Street: 480 NEPONSET STREET 9A

City or Town: CANTON

State: MA

Zip: 02021

Country: USA

4. Business Phone No.

781-821-0980

5. State of Incorporation

State: RI

6. Brief Description of the Character of Business Conducted in Rhode Island

Indoor Air Quality Testing, Ventilation System Cleaning, Mold Remediation, Emergency Fire and Water Restoration and Repair Services

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	JAMES M CLARY III	80 DORSET ROAD WABAN, MA 02468 USA
TREASURER	PHILIP B RENZI	172 FAIRVIEW AVENUE REHOBOTH, MA 02769 USA
SECRETARY	JAMES M. CLARY III	80 DORSET ROAD WABAN, MA 02468 USA
DIRECTOR	JAMES M. CLARY III	80 DORSET ROAD WABAN, MA 02468 USA
DIRECTOR	PHILIP B. RENZI	172 FAIRVIEW AVENUE REHOBOTH, MA 02769 USA

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares <i>Number of Shares</i>	Total Issued and Outstanding <i>Num of Shares</i>
CNP		\$0.00	1,000.00	1000
CNP		\$0.00	1,000.00	0

9. 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.

Signed this 10 Day of February, 2011 at 1:46:23 PM. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By JAMES M. CLARY III
Signature of Authorized Representative of the Corporation

PRESIDENT
Title

This report cannot be accepted for filing if an officer has executed the form and he/she is not listed in section 7.

Form No. 630
Revised 09/07

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