

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. 7-1.2-150).

subject to a penalty fee of \$25.0	<i>0</i> .		nual report within thirty (30) days	after the time prescribed by l	aw (R.I.G.L. /-1.2-1501(c&d))	
1. Corporate ID No. 36046	Industrial Sec	2. Name of Corporation Industrial Security and Investigators, Inc.				
3. Street Address Principal Business Office 58 Waterman Avenue			North Providence	State RI	^{Zip} 02911	
4. Business Phone No. (401) 231-8310 5. State of Incorporation Rhode Island						
6. Brief Description of the Char Investigative and Prote	acter of Business Conducted ctive Services	in Rhode Island				
		RS: ("X" BOX FOR ATTA	A <i>CHMENT)</i>	ACES BEFORE USING	ATTACHMENTS	
President Name			Vice President Name			
Maurice T. Dionne Street Address			Genevieve M. Dionne			
170 Providence Pike	Unit 22		Street Address 170 Providence Pike,	, Unit 22		
North Smithfield	State RI	^{Zip} 02896	City North Smithfield	State RI	^{Zip} 02896	
Secretary Name Maurice T. Dionne			Treasurer Name Genevieve M. Dionne			
Street Address 170 Providence Pike, Unit 22			Street Address 170 Providence Pike, Unit 22			
City North Smithfield	State RI	^{Zip} 02896	City North Smithfield	State RI	Zф 02896	
8. NAMES AND ADDRES	SES OF THE DIRECT		TACHMENT) FILL IN S			
Director Name Maurice T. Dionne			Director Name			
Street Address			Genevieve M. Dionne Street Address			
170 Providence Pike, Unit 22			170 Providence Pike, Unit 22			
City North Smithfield	State	Zip	City	State	Zip	
Director Name	RI	02896	North Smithfield Director Name	RI RI	[02896	
			•			
Street Address	,		Street Address			
City	State	Zip	Сйу	State	Zip	
9. SHARES AUTHORIZE	D		10. SHARES ISSUED (ISSUED SHARES — THIS SECTION			
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	
			mask service			
This report must be execu	ited on behalf of the c	orporation by an authorize	ed representative. If the corp	poration is in the hand	s of a receiver or trustee	
his report must be execu	ted on behalf of the co	prporation by the receiver	or trustee.		s of a receiver of trustee,	
	FILED		Under penalty of perj	ury, I declare and affirm to canying schedules and sta	that I have examined this repartements, and that all statem	
			contained herein are	contained herein are true and correct.		
File Date	B 1 0 2011	-: [:]	fauric	J. Duein	~ 1/24/11	
Check No. By 12063 By: 412063 FOR SECRETARY OF STATE USE ONLY			Signature Date Date			
			Maurice T. Dionne Print or Type Name			
			President			
			Title			