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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.	2. Name of Corporation			
24153	Martin Fireproofing Corporation			
3. Street Address Principal Business Office		City	State	Zip
2200 Military Road		Tonawanda	NY	14150
4. Business Phone No.	5. State of Incorporation			
(716)692-3680	New York			

6. Brief Description of the Character of Business Conducted in Rhode Island
Sale and installation of roof deck systems

7. NAMES AND ADDRESSES OF THE OFFICERS: *("X" BOX FOR ATTACHMENT)* ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name			Vice President Name		
John D. Martin			Thomas J. Martin		
Street Address			Street Address		
75 Lake Ledge Drive			28 Plymouth Place		
City	State	Zip	City	State	Zip
Williamsville	NY	14221	Williamsville	NY	14221
Secretary Name			Treasurer Name		
Daniel J. Bowman					
Street Address			Street Address		
41 Centerview Drive					
City	State	Zip	City	State	Zip
West Seneca	NY	14224			

8. NAMES AND ADDRESSES OF THE DIRECTORS: *("X" BOX FOR ATTACHMENT)* ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name			Director Name		
John D. Martin			Thomas J. Martin		
Street Address			Street Address		
75 Lake Ledge Drive			28 Plymouth Place		
City	State	Zip	City	State	Zip
Williamsville	NY	14221	Williamsville	NY	14221
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip

9. SHARES AUTHORIZED

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.

10. SHARES ISSUED *("X" BOX FOR ATTACHMENT)* ☐

ISSUED SHARES — THIS SECTION MUST BE COMPLETED

Number of Shares	Class/Series	Par Value
35808	A	NONE
500	B	NONE

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.

[redacted]

FILED
File Date FEB 28 2011
Check No. By MNC
By: 010372
FOR SECRETARY OF STATE USE ONLY
59715-12-603978

[redacted]

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 2/24/11

Daniel J. Bowman
Print or Type Name

Secretary
Title

[redacted]

Form 630 Rev. 08/08