

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

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. 438100	2. Name of Corporation R & B Development Corp.				
3. Street Address Principal Business Office 27 Sims Avenue			Providence	State RI	Zip 02909
4. Business Phone No. 5. State of Incorporation Rhode Island			<u> </u>		
6. Brief Description of the Character of Real Estate Construction	f Business Conducted in Ri	bode Island		—	
7. NAMES AND ADDRESSES President Name	OF THE OFFICERS:	("X" BOX FOR ATTA		SPACES BEFORE USING	G ATTACHMENTS
Clayton Rockefeller			Vice President Name Nicholas Bauta		
Street Address 532 Kinsley Ave, Unit 501			Street Address 532 Kinsley Ave, Unit 205		
City: Providence	State RI	<sup>Ζίρ</sup> 02909	City Providence	State RI	Zip 02909
Secretary Name Clayton Rockefeller			Treasurer Name Clayton Rockefeller		
Street Address 532 Kinsley Ave, Unit 501			Street Address 532 Kinsley Ave, Unit 501		
City Providence	State RI	<sup>Ζφ</sup> <b>02909</b>	City Providence	State RI	7 <i>ip</i> 02909
8. NAMES AND ADDRESSES  Director Name	OF THE DIRECTORS	: ("X" BOX FOR ATT	: Director Name		
Clayton Rockefeller			Nicholas Bauta		
Street Address 532 Kinsley Ave, Unit 501			Street Address 532 Kinsley Ave, Unit 205		
City	State	Zip	City	State State	Zip
Providence	RI	02909	Providence	RI	02909
Director Name			Director Name		
Street Address			Street Address		
City	State	Ζip	City	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) 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
			1,000.00	STK	.01
This report must be executed of this report must be executed of	on behalf of the corpo	oration by an authorize	d representative. If the co	orporation is in the han-	ds of a receiver or trustee,
The report must be produced to	n centari or the corpo.	ration by the receiver t	n trustee.		
			Under penalty of p	erjury, I declare and affirm	that I have examined this report,
FLE			eontained herein ar		statements, and that all statements
File Date				<del></del>	2.28.11
Check No. MAR 0 2 2011 Signature Date					Date
By: S498809  FOR SECRETARY OF STATE USE ONLY			Clayton Rockefeller		
			Print or Type Name		
			President		
<u>L., </u>			Title		Form 630 Rev. 08/08