



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

A. Ralph Molis, 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 66825 | | 2. Name of Corporation PLYMOUTH ENVIRONMENTAL SERVICES, INC. | | |
| 3. Street Address Principal Business Office 7 PEZZULLO ST | | City JOHNSTON | State RI | Zip 02919 |
| 4. Business Phone No. 401-946-4100 | | 5. State of Incorporation RHODE ISLAND | | |
| 6. Brief Description of the Character of Business Conducted in Rhode Island BUILDING TRADE CONTRACTOR | | | | |
| 7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS | | | | |
| President Name VICTORIA DWORKIN | | Vice President Name PHILIP B. RENZI | | |
| Street Address 7 PEZZULLO ST | | Street Address 7 PEZZULLO ST | | |
| City JOHNSTON | State RI | Zip 02919 | City JOHNSTON | State RI |
| Secretary Name VICTORIA DWORKIN | | Treasurer Name VICTORIA DWORKIN | | |
| Street Address 7 PEZZULLO ST | | Street Address 7 PEZZULLO ST | | |
| City JOHNSTON | State RI | Zip 02919 | City JOHNSTON | State RI |
| 8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS | | | | |
| Director Name VICTORIA DWORKIN | | Director Name | | |
| Street Address 7 PEZZULLO ST | | Street Address | | |
| City JOHNSTON | State RI | Zip 02919 | City | State |
| Director Name | | Director Name | | |
| Street Address | | Street Address | | |
| City | State | Zip | City | State |
| 9. SHARES AUTHORIZED | | 10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> | | |
| 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. | | ISSUED SHARES — THIS SECTION MUST BE COMPLETED | | |
| | | Number of Shares 100 | Class/Series | Par Value |

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 CORPORATIONS DIVISION
 STATE

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.

FILED

MAR 29 2011

File Date

Check No.

By:

By: *[Signature]*

FOR SECRETARY OF STATE USE ONLY

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

[Signature]
BERNARD P. RENZI

Print or Type Name

V. PRES.

Title