



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. 100852		2. Name of Corporation Pinnacle Building Corp.			
3. Street Address Principal Business Office 114 Woodstock Lane			City Cranston	State Rhode Island	Zip 02920
4. Business Phone No. 946-6969		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island Building, Construction, Remodeling and improvements of any and all residential, commercial or any other structure.					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Thomas M. Misto			Vice President Name Thomas M. Misto		
Street Address 114 Woodstock Lane			Street Address 114 Woodstock Lane		
City Cranston	State Rhode Island	Zip 02920	City Cranston	State Rhode Island	Zip 02920
Secretary Name Thomas M. Misto			Treasurer Name Thomas M. Misto		
Street Address 114 Woodstock Lane			Street Address 114 Woodstock Lane		
City Cranston	State Rhode Island	Zip 02920	City Cranston	State Rhode Island	Zip 02920
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Thomas M. Misto			Director Name		
Street Address 114 Woodstock Lane			Street Address		
City Cranston	State Rhode Island	Zip 02920	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED					
10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
ISSUED SHARES — THIS SECTION MUST BE COMPLETED					
Number of Shares		Class/Series		Par Value	
None					
THIS SECTION MUST BE COMPLETED					

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	
File Date	NOV 14 2011
Check No.	513
By	BY
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 Thomas M. Misto Date 10/27/11
Print or Type Name
Thomas M. Misto
President
Title