



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 2012

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. 155136		2. Name of Corporation MARVIC, INC.			
3. Street Address Principal Business Office 160 SOUTHRIDGE STREET			City AUBURN	State MA	Zip 01501
4. Business Phone No. 508-798-2600		5. State of Incorporation MASSACHUSETTS			
6. Brief Description of the Character of Business Conducted in Rhode Island MANUFACTURE HOME ADDITIONS					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name MARCO GABRIELLI			Vice President Name		
Street Address 324 GROGAN ROAD			Street Address		
City BARRE	State MA	Zip 01005	City	State	Zip
Secretary Name REVECCA GABRIELLI			Treasurer Name ROBERT WIRONEN		
Street Address 89 VIRGINIA DRIVE			Street Address 26 WASHINGTON STREET		
City ROCHDALE	State MA	Zip 01542	City TYNGSBOROUGH	State MA	Zip 01879
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name ROBERT WIRONEN			Director Name ANTHONY GENTILE		
Street Address 26 WASHINGTON STREET			Street Address 160 SOUTHRIDGE STREET		
City TYNGSBOROUGH	State MA	Zip 01879	City AUBURN	State MA	Zip 01501
Director Name MARCO GABRIELLI			Director Name KEVIN KIELER		
Street Address 324 GROGAN ROAD			Street Address 160 SOUTHRIDGE STREET		
City BARRE	State MA	Zip 01542	City AUBURN	State MA	Zip 01501
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	Class/Series	Par Value
			100	COMMON	NPV

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 **FEB 10 2012**
 Check No. By *[Signature]*
 By: **5491**
 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 **1/5/2012**

MARCO GABRIELLI
 Print or Type Name
PRESIDENT
 Title