



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. 3006		2. Name of Corporation BRUNCA WATERPROOFING CORPORATION			
3. Street Address Principal Business Office 43 WILSON STREET			City PROVIDENCE	State RI	Zip 02907-2430
4. Business Phone No. (401) 353-2769		5. State of Incorporation RHODE ISLAND			
6. Brief Description of the Character of Business Conducted in Rhode Island Construction and waterproofing.					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name STEPHEN M. PARISI			Vice President Name KENNETH N. PARISI		
Street Address 43 WILSON STREET			Street Address 43 WILSON STREET		
City PROVIDENCE	State RI	Zip 02907-2430	City PROVIDENCE	State RI	Zip 02907-2430
Secretary Name STEPHEN M. PARISI			Treasurer Name STEPHEN M. PARISI		
Street Address 43 WILSON STREET			Street Address 43 WILSON STREET		
City PROVIDENCE	State RI	Zip 02907-2430	City PROVIDENCE	State RI	Zip 02907-2430
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name STEPHEN M. PARISI			Director Name KENNETH N. PARISI		
Street Address 43 WILSON STREET			Street Address 43 WILSON STREET		
City PROVIDENCE	State RI	Zip 02907-2430	City PROVIDENCE	State RI	Zip 02907-2430
Director Name ROBERT J. G. PARISI			Director Name		
Street Address 43 WILSON STREET			Street Address		
City PROVIDENCE	State RI	Zip 02907-2430	City	State	Zip
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 1500	Class/Series COMMON	Par Value NO PAR VALUE

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 13 2012**
Check No. **54573**
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 _____ Date **1/24/12**
STEPHEN M. PARISI
Print or Type Name
PRESIDENT
Title