



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. 2957		2. Name of Corporation Brosco & Brosco PC			
3. Street Address Principal Business Office 312 South Main Street			City Providence	State Rhode Island	Zip 02903
4. Business Phone No. (401) 272-5555		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island Law Office - General Practice of Law					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Dino A. Brosco, Esq.			Vice President Name Patrick S. Bristol, Esq.		
Street Address 312 South Main Street			Street Address 312 South Main Street		
City Providence	State Rhode Island	Zip 02903	City Providence	State Rhode Island	Zip 02903
Secretary Name A.J. Brosco, Esq.			Treasurer Name Dino A. Brosco, Esq.		
Street Address 312 South Main Street			Street Address 312 South Main Street		
City Providence	State Rhode Island	Zip 02903	City Providence	State Rhode Island	Zip 02903
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name A.J. Brosco, Esq.			Director Name Dino A. Brosco, Esq.		
Street Address 312 South Main Street			Street Address 312 South Main Street		
City Providence	State Rhode Island	Zip 02903	City Providence	State Rhode Island	Zip 02903
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Providence	Rhode Island	02903	Providence	Rhode Island	02903
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"/> FILL IN SPACES BEFORE USING ATTACHMENTS		
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 2,000	Class/Series Common	Par Value Without Par

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.

File Date _____
Check No. _____
By: _____
FOR SECRETARY OF STATE USE ONLY

BY

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.

FILED

MAR 05 2012

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Signature _____ Date _____
Dino A. Brosco, Esq.
Print or Type Name
President
Title