



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State - Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2012

Filing Period: January 1 - March 1 • This report must be typed or printed legibly.

Filing Fee: \$50.00 • FAILURE TO FILE THIS REPORT BY MARCH 31 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. 22939		2. Exact name of the Corporation Rylah Construction Corporation			
3. Principal office address 60 George Eddy Drive		City Pascoag	State R.I.	Zip 02859	
4. Business Phone No. 401-568-5764		5. State of Incorporation Rhode Island			
6. Brief description of the character of business conducted in Rhode Island For all legal purposes					
7. LIST <u>ALL</u> OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name Bruce W. Rylah			Vice-President Name Scott W. Rylah		
Street Address 60 George Eddy Drive			Street Address 55 George Eddy Drive		
City Pascoag	State R.I.	Zip 02859	City Pascoag	State R.I.	Zip 02859
Secretary Name Fern M. Rylah			Treasurer Name Bruce Rylah & Fern Rylah		
Street Address 60 George Eddy Drive			Street Address 60 George Eddy Drive		
City Pascoag	State R.I.	Zip 02859	City Pascoag	State R.I.	Zip 02859
8. LIST <u>ALL</u> DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name Bruce W. Rylah			Director Name Scott W. Rylah		
Street Address 60 George Eddy Drive			Street Address 55 George Eddy Drive		
City Pascoag	State R.I.	Zip 02859	City Pascoag	State R.I.	Zip 02859
Director Name Fern M. Rylah			Director Name		
Street Address 60 George Eddy Drive			Street Address		
City Pascoag	State R.I.	Zip 02859	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.			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
			100	Common	none

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

FILED

MAR 30 2012

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.

Bruce W. Rylah
Signature of Authorized Representative

03/29/2012

Date

Bruce W. Rylah, President

Print or Type Name of Authorized Representative