



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 02904-261
401.222.304

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. <u>56179</u>	2. Name of Corporation <u>MAINTENANCE PLUS, INC</u>		
3. Street Address Principal Business Office <u>148 FORT STREET</u>		City <u>EAST PROVIDENCE</u>	State <u>R.I.</u>
4. Business Phone No. <u>(401) 454-8133</u>		5. State of Incorporation <u>RHODE ISLAND</u>	
6. Brief Description of the Character of Business Conducted in Rhode Island <u>ELECTRICIAN, REPAIR + MAINTENANCE (COMMERCIAL + RESIDENTIAL PROPERTY)</u>			

7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name <u>JOSEPH J. SOUSA</u>			Vice President Name <u>JOAN M. SOUSA</u>		
Street Address <u>148 FORT STREET</u>			Street Address <u>148 FORT STREET</u>		
City <u>EAST PROVIDENCE</u>	State <u>R.I.</u>	Zip <u>02914-5140</u>	City <u>EAST PROVIDENCE</u>	State <u>R.I.</u>	Zip <u>02914-5140</u>
Secretary Name <u>JOAN M. SOUSA</u>			Treasurer Name <u>JOSEPH J. SOUSA</u>		
Street Address <u>148 FORT STREET</u>			Street Address <u>148 FORT STREET</u>		
City <u>EAST PROVIDENCE</u>	State <u>R.I.</u>	Zip <u>02914-5140</u>	City <u>EAST PROVIDENCE</u>	State <u>R.I.</u>	Zip <u>02914-5140</u>

8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name <u>JOSEPH J. SOUSA</u>			Director Name <u>JOAN M. SOUSA</u>		
Street Address <u>148 FORT STREET</u>			Street Address <u>148 FORT STREET</u>		
City <u>EAST PROVIDENCE</u>	State <u>R.I.</u>	Zip <u>02914-5140</u>	City <u>EAST PROVIDENCE</u>	State <u>R.I.</u>	Zip <u>02914-5140</u>
Director Name <u>-</u>			Director Name <u>-</u>		
Street Address <u>-</u>			Street Address <u>-</u>		
City <u>-</u>	State <u>-</u>	Zip <u>-</u>	City <u>-</u>	State <u>-</u>	Zip <u>-</u>

9. SHARES AUTHORIZED

1,000 NO PAR VALUE - COMMON

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.

10. SHARES ISSUED ("X" BOX FOR ATTACHMENT)

ISSUED SHARES — THIS SECTION MUST BE COMPLETED

Number of Shares	Class/Series	Par Value
<u>500</u>	<u>Common</u>	<u>NO PAR</u>

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

JAN 08 2013

File Date _____
Check No. BY MNC
By: CA # 491

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.

Joseph J. Sousa 1/7/13
Signature Date
JOSEPH J. SOUSA
Print or Type Name
PRESIDENT
TITLE