



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 2014

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. 88503		2. Exact name of the Corporation Phaneuf Metal Fabricating Inc.			
3. Principal office address 1117 Eddie Dowling Hwy			City North Smithfield	State RI	Zip 02896
4. Business Phone No. 401-258-0346		5. State of Incorporation Rhode Island			
6. Brief description of the character of business conducted in Rhode Island Machine Shop					
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name Donald Phaneuf			Vice-President Name		
Street Address 1117 Eddie Dowling Hwy			Street Address		
City North Smithfield	State RI	Zip 02896	City	State	Zip
Secretary Name Donald Phaneuf			Treasurer Name Donald Phaneuf		
Street Address 1117 Eddie Dowling Hwy			Street Address 1117 Eddie Dowling Hwy		
City North Smithfield	State RI	Zip 02896	City North Smithfield	State RI	Zip 02896
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
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"/>		
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
			8000	Common	No Par

SECRETARY OF STATE
 CORPORATIONS DIV
 2014 FEB 14 PM 12:07

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: _____

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.

Donald Phaneuf 2-14-14
 Signature of Authorized Representative Date

Donald Phaneuf

Print or Type Name of Authorized Representative

FILED

FEB 14 2014

By 217537 12:07
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