



State of Rhode Island and Providence Plantations
Office of the Secretary of State

Fee: \$50.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Business Corporation
Annual Report**

Filing Period: January 1 - March 1

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.

ANNUAL REPORT YEAR: 2014

1. Corporate ID No. 000110446

2. Name of Corporation Matrix Power Services, Inc.

3. Street Address Principal Business Office:

No. and Street: 59 DAVIS DRIVE

P.O. BOX 32

City or Town: PASCOAG

State: RI

Zip: 02859

Country: USA

4. Business Phone No.

4015677700

5. State of Incorporation

State: RI

6. Brief Description of the Character of Business Conducted in Rhode Island

TO ENGAGE IN THE BUSINESS OF PROVIDING WELDING AND MECHANICAL SERVICES.

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	DAVID R JARRY	155 POMONA STREET NORTH SMITHFIELD, RI 02896 USA
TREASURER	ANN-MARIE E FONTAINE	235 NANCY LANE HARRISVILLE, RI 02830 USA
VICE PRESIDENT	CHRISTOPHER S SURETTE	1115 71ST ST NW BRADENTON, FL 34209 USA

VICE PRESIDENT	RICHARD D AHERN JR	430 SNAKE MEADOW HILL ROAD STERLING, CT 06377 USA
DIRECTOR	RICHARD D AHERN JR	430 SNAKE MEADOW HILL ROAD STERLING, CT 06377 USA
DIRECTOR	DAVID R JARRY	155 POMONA STREET NORTH SMITHFIELD, RI 02896 USA
DIRECTOR	NORMAN J SOULLIER III	490 SOUTH MAIN STREET PASCOG, RI 02859 USA

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares <i>Number of Shares</i>	Total Issued and Outstanding <i>Num of Shares</i>
STK		\$0.0000	900.00	300

9. 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.

Signed this 19 Day of February, 2014 at 6:01:20 PM. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By ANN-MARIE FONTAINE
Signature of Authorized Representative of the Corporation

TREASURER
Title

This report cannot be accepted for filing if an officer has executed the form and he/she is not listed in section 7.

Form No. 630
Revised 09/07

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