

FOR SECRETARY OF STATE USE ONLY

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street Providence, RI 02904-2615 401.222.3040

2013 PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

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. 7-1.2-1 subject to a penalty fee of \$25.00.	501(e), each corporation fa	iling or refusing to file its ann	ual report within thirty (30) days	after the time prescribed by lau	(R.I.G.L. 7-1.2-1501(c&d)) is
1. Corporate ID No. 88540	2. Name of Corporation East Coast Masonry and Restoration, Inc.				
3. Street Address Principal Business Office Michael St. Angelo Jr., 515 Greenville Avenue			Johnston	State R.I.	^{Zip} 02919
4. Business Phone No. 5. State of Incorpora Rhode Island					
6. Brief Description of the Character of Business Conducted in Rhode Island Masonry restoration and construction.					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTAC President Name Michael A. St. Angelo, Jr.			CHMENT) TILL IN SPACES BEFORE USING ATTACHMENTS Vice President Name Michael A. St. Angelo, Jr.		
Street Address 515 Greenville Avenue			Street Address 515 Greenville Avenue		
City Johnston	State R.I.	^{Ζφ} 02919	City Johnston	State R.I.	^{Ζφ} 02919
Michael A. St. Angelo, Jr.			Treasurer Name Michael A. St. Angelo, Jr.		
Street Address 515 Greenville Avenue			Street Address 515 Greenville Avenue		
City Johnston	State R.I.	^{Zip} 02919	City Johnston	State R.I.	^{Zip} 02919
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATT. Director Name Michael A. St. Angelo, Jr.			Director Name		
Street Address 515 Greenville Avenue			Street Address		AR CONT
^{City} Johnston	State R.I.	<i>շա</i> 02919	City	State	<i>zφ</i> 5 ≥ 20
Director Name			Director Name		
Street Address			Street Address		
Сцу	State	Zip	Ciţy	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
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
			200	Common	No 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.					
		FILED AR 06 2014		panying schedules and stat	nat I have examined this report ements, and that all statement

President