

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

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.

1. Corporate ID No. 71007	2. Name of Cor Rotondo E	Corporation D Builders, Inc.				
3. Street Address Principal Bi 37 Spruce Avenue	usiness Office		Cin- Narragansett	State RI	^{Zip} 02882	
		5. State of Incorporate Rhode Island	State of Incorporation Chode Island			
6. Brief Description of the Ch General Carpentry W	ork .					
. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR A resident Name Raffaele Rotondo		TACHMENT) TILL IN SPACES BEFORE USING ATTACHMENTS Vice President Name None				
Street Address 37 Spruce Avenue			Street Address	Street Address		
City Narragansett	State RI	^{Zip} 02882	City	State	Zip	
Secretary Name Raffaele Rotondo				Treasurer Name Raffaele Rotondo		
treet Address 37 Spruce Avenue		Street Address 37 Spruce Avenue				
City Narragansett	State RI	^{Zip} 02882	City Narragansett	State RI	^{Zip} 02882	
NAMES AND ADDR	ESSES OF THE DIR	ECTORS: ("X" BOX FOR	Director Name	n spaces before usin	IG ATTACHMENTS	
treet Address			Street Address		9 C	
City	State	Zip	Сиу	State	199	
Hrector Name			Director Name			
treet Address		Street Address		2 D		
City	State	Zip	City	State	6 m	
, SHARES AUTHORIZED				10. SHARES ISSUED (X. BOX FOR ATTACHMENT) SSUED SHARES — THIS SECTION MUST BE COMPLETED		
This information is cu	rrently of record in t	he Office of the Secretary	of Number of Shares	Class/Series	Par Value	
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.			200	Common	No Par Value	
			THIS SEC	TION MUST BE G		
		the corporation by an authore corporation by the rece	orized representative. If the civer or trustee.	corporation is in the hand	ls of a receiver or trustee	

_		Under penalty of perjury, I declare and affirm including any accompanying schedules and	n that I have examined this report, statements, and that all statements
File Date	FILED	contained herein are true and correct.	12/11/14
s and the second	DEC 1 0 2014	Signature	Date
Check No.	DEC 19 2014	Raffaele Rotondo	
	N38958	Print or Type Name	
		President	
POR SPECIFICARY OF STIGHT USE GNEED	1H.H. 3.030.V	√.itle	Form 630 Rev. 08/08