

## 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

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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.

Filing Fee: \$50.00			ARCH 31 WILL RES	ULI IN A \$25.00 PENA	LITPEE.	
1. Entity ID No.	2. Exact nar	ne of the Corporation				
000157433	ACE	CONSTRUCTIO	ON COMPA	ے سریر ہوت		
3. Principal office address			City	State	Zip	
1395 ATWOOD AVE SUITE 210			JUHNS TO	~ RI	02419	
4. Business Phone No.			5. State of Incorporation  RHODE ISLA-D			
6. Brief description of the cl	haracter of business	conducted in Rhode Island				
MINON CON	-STRUC,	Tion				
7: LIST ACL OFFICERS (N	NAMES AND ADDE	ESSES) ("X" BOX FOR A	TACHMENT) MASA	SUNSTRUCTOR STRUCTURE	v č	
President Name			Vice-President Name			
DAVID F. LUCAS			SAME			
Street Address			Street Address			
1395 ATWOOD	AVE SU	ITE 210				
City 50 HN3 TON	State	Zip	City	State	Zip	
50 Hrs Ton	NE	02919				
Secretary Name			Treasurer Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
8: LIST ALL DIRECTORS	(NAMES AND ADD	RESSES) ("X" BOX FOR	ATTACHMENT)			
Director Name			Director Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip RARY	
Director Name			Director Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip Oi III	
9. SHARES AUTHORIZED	Y # 7 10 3 3 4 5 3 3		10, SHÄRES ISSUED	("X" BOX FOR ATTACH	MENT)	
			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.					
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Form No	630			B'

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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.

SEP 1 0 2015

Signature of Authorized Representative

// 7/13 Date

BY On 256074

Print or Type Name of Authorized Representative

Form No. 630 Revised: 01/2012