

James R. Langevin, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-277-3040

## PROFIT CORPORATION ANNUAL REPORT 1997

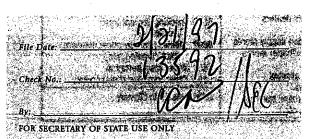
Filing Period: January 1-March 1 • Filing Fee: \$50.00

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(FORM MUST	BE TYPED	IN BLACK)	. : ' .		

CROOME BROS. SANITATION, INC. 1. Corporate ID No. 5300 City State Zip 02903 <u>Providence</u> RI <u>2700 Hošpital</u> Trust Tower 5. State of Incorporation RHODE ISLAND 6. SIC Code 4. Business Phone No. 8888 401 274-9200 7. Brief Description of the Character of Business Conducted in Rhode Island Construction and maintenance of sanitary sewer systems. SE AVANTES AVID ATTITUES SERVICEDA CITAL CONTROL Vice President Name President Name Earl T.P. Croome Earl T.P. Croome Street Address Street Address 30 Hillside Ave. 30 Hillside Ave. City Zip City Rehoboth Rehoboth 02769 MA 02769 MA Secretary Name Treasurer Name Earl T.P. Croome Earl T.P. Croome Street Address Street Address 30 Hillside Ave. 30 Hillside Ave City City MA 02769 02769 MA Rehoboth Rehoboth DEPOSITE ALTO SECRETARIO DE CONTRACACION SECURIO DE CONTRACACIONO DE CONTR Director Name None Earl T.P. Croome Street Address Street Address 30 Hillside Ave. State Zip City City State Zip Rehoboth MA 02769 Director Name Director Name None None Street Address Street Address Zip State City State Zip City TO STINATURE ADDITIONAL CONTROL OF THE CONTROL OF T ISSUED SHARES **AUTHORIZED SHARES** Par Value Class/Series Number of Shares Class/Series Par Value Number of Shares 600 SHS NO PAR COM 160 No Par Com

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee





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.

Date

2/15/97

Earl T.P. Croome Print or Type Name of Officer

President

Title of Officer

Signature of Officer