



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

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

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1998
Filing Period: January 1-March 1 • Filing Fee: \$50.00



(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 06500 2. Name of Corporation American Electric Service Inc.
3. Street Address Principal Business Office 95500 W. Warwick State R.I. Zip 02893
4. Business Phone No. (401)826-7770 5. State of Incorporation R.I. 6. SIC Code 0273

7. Brief Description of the Character of Business Conducted in Rhode Island
Electrical Contracting Business

8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT)

President Name <u>Thomas Reali</u> Street Address <u>27 Brookdale Dr.</u> City <u>W. Warwick</u> State <u>R.I.</u> Zip <u>02893</u>	Vice President Name <u>Jennine Reali</u> Street Address <u>10 Steere St.</u> City <u>Johnston</u> State <u>R.I.</u> Zip <u>02919</u>
Secretary Name <u>Stephen Reali</u> Street Address <u>10 Steere St.</u> City <u>Johnston</u> State <u>R.I.</u> Zip <u>02919</u>	Treasurer Name <u>Jennine Reali</u> Street Address <u>10 Steere St.</u> City <u>Johnston</u> State <u>R.I.</u> Zip <u>02919</u>

9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT)

Director Name <u>Stephen Reali</u> Street Address <u>10 Steere St.</u> City <u>Johnston</u> State <u>R.I.</u> Zip <u>02919</u>	Director Name <u>Jennine Reali</u> Street Address <u>10 Steere St.</u> City <u>Johnston</u> State <u>R.I.</u> Zip <u>02919</u>
Director Name <u>Thomas Reali</u> Street Address <u>27 Brookdale Dr.</u> City <u>W. Warwick</u> State <u>R.I.</u> Zip <u>02893</u>	Director Name <u>Johnston</u> State <u>R.I.</u> Zip <u>02919</u>

10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)

AUTHORIZED SHARES	Class/Series	Par Value
8000	Common	No Par Value

11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)

ISSUED SHARES	Class/Series	Par Value
817	Common	none

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

File Date: 3/9

Check No.: 0363

By: KRP

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.

Jennine Reali 3/28/98
Signature of Officer Date

Jennine Reali
Print or Type Name of Officer

V. President / Treasurer