

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

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR __

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.

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i. Entity ID No.		ne of the Corporation					
113755	A & M S	A & M Sheetmetal & Roofing, Inc.					
3. Principal office address 16 Paul Street	<u> </u>		City Pawtucket	State Ri	^{Zip} 02860		
Business Phone No.			5. State of Incorporation Rhode Island				
6. Brief description of the ch To manufacture, pu	rchase, sell, ar	nd deal in, apply, lay,	construct, install	and repair roofing.			
ALEGA AFOREOGRASIO	amesandadu:	Beber 200 Foxefor A					
esident Name Michael Hull, Jr.			Vice-President Name Deborah Hull				
Street Address 16 Paul Street			Street Address 16 Paul Street				
Dity Pawtucket	State RI	Zip 02860	City Pawtucket	State RI	Zip 02860		
Secretary Name Michael Hull, Jr.			Treasurer Name Deborah Hull				
Street Address 16 Paul Street			Street Address 16 Paul Street				
City Pawtucket	State RI	Zip 02860	City Pawtucket	State RI	Zip 02860		
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Director Name Michael Hull, Jr.			Director Name Deborah Hull				
Street Address Same as above			Street Address Same as above				
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Director Name			Director Name				
Street Address			Street Address				
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his information is currently of record in the Office of the Secretary State. Changes require an additional filing.		100	Common	No Par			
See Section 9 of instruction	on sheet.						
This report must be execu	ted on behalf of the this report mu	corporation by an authorize st be executed on behalf o	т те согрогацоп иу иле п	ereivei of unside.	is of a receiver or trustee,		
The Dance	er e grande de la companya de la co La companya de la co	FILED 8	this report, including	erjury, i deciate and am ng any accompanying s ente contained berein a	chedules and statements,		

The report filled by excepted on person of the series of						
THE SAME	FILED &	Under penalty of perjury, I declare and affirm the this report, including any accompanying sched and that all statements contained herein are true.	ules and staten			
	JAN 1 9 2016	Signature of Authorized Representative	/-//-/ ₍			
ne sperimen en e	6061	Michael Hull, Jr.	<u> </u>			
		Print or Type Name of Authorized Representative				

Form No. 630 Revised: 01/2012