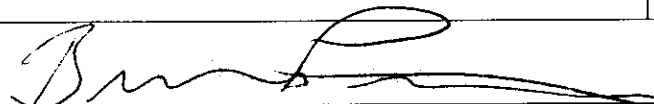





State of Rhode Island and Providence Plantations
Department of State - Business Services Division

Annual Report for the year: 2016
Corporation

- Filing period: January 1 - March 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by April 1.

1. Entity ID Number 106542		2. Exact name of the Corporation NEW ENGLAND SOLA CONCEPTS, INC.			
3. Principal Office Address 38 Lockhart Avenue			City Warwick	State RI	Zip 02886
4. Business Phone Number (401) 736-2974			5. State of Incorporation Rhode Island		
6. Brief description of the character of business conducted in Rhode Island To deal in the installation and maintenance of solar heating and lighting devices and fixtures.					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Brendan Peterson			Vice-President Name Alicia Peterson		
Street Address 7 Allison Avenue			Street Address 7 Allison Avenue		
City Coventry	State RI	Zip 02816	City Coventry	State RI	Zip 02816
Secretary Name Brendan Peterson			Treasurer Name Alicia Peterson		
Street Address 7 Allison Avenue			Street Address 7 Allison Avenue		
City Coventry	State RI	Zip 02816	City Coventry	State RI	Zip 02816
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized			10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>		
This information is currently of record in the Department of State. Changes require an additional filing.			NUMBER OF SHARES		PAR VALUE
			300	Common	0
11. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee. <i>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.</i>					
Name of Authorized Representative Brendan Peterson, President					Date 8/3/16
Signature of Authorized Representative 					

FILED 

AUG 09 2016

2563

MAIL TO:
 Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040
 Website: www.sos.ri.gov