

1. Corporate ID No. 104824

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street Providence, RI 02904-2615 401.222,3040

Form 630 Rev. 08/08

2017

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

2. Name of Corporation Fontaine Inspections, Inc.

Filing Period: January 1 - March 1 • Filing Fee: \$50.00\* • THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.

\* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(cord)) is subject to a penalty fee of \$25.00.

3. Street Address Principal Business Office 121 Bacon Street			City Pawtucket	State RI	<i>zip</i> 02860
4. Business Phone No.		5. State of Incorporation Rhode Island	ווכ		
6. Brief Description of the Char Inspection and Manage	racter of Business Conduc ement of Real Prope	ted in Rhode Island erty			
7. NAMES AND ADDRE	SSES OF THE OFFI	CERS: ("X" BOX FOR ATTA		SPACES BEFORE USING	ATTACHMENTS
President Name			Vice President Name		
Kellie J. Marcil			Kenneth Marcil		
Street Address 121 Bacon Street			Street Address 121 Bacon Street		
<sub>பேற</sub> ் Pawtucket	State RI	<sup>z<sub>ip</sub></sup> 02860	City Pawtucket	State RI	<sup>Zip</sup> 02860
Secretary Name Kellie J. Marcil			Treasurer Name Kenneth Marcil		
Street Address 121 Bacon Street			Street Address 121 Bacon Street		
<sup>Ciṇ</sup> Pawtucket	State RI	<sup>Zip</sup> 02860	City Pawtucket	State RI	<sup>Zip</sup> 02860
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATT Director Name Kellie J. Marcil			ACHMENT)  FILL IN SPACES BEFORE USING ATTACHMENTS  Director Name  Kenneth Marcil		
Street Address			Street Address		
121 Bacon Street			121 Bacon Street		
City	State	Zip	City	State	Zip
Pawtucket  Director Name	RI	02860	Pawtucket  Director Name	RI	02860
Street Address			Street Address		
City	State	Zip	City .	State	Zip
9. SHARES AUTHORIZE	I.			O ("X" BOX FOR ATTACE ECTION MUST BE COMPLETED	
			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. See Section 9 of instruction sheet.			200	Common	No Par
				15 100,000 110	nusymptistic (2
_			FILED	District and second size	
This report must be exec	uted on behalf of th	e corporation by an authorize	d representation of the	corporation is in the hand	s of a receiver or trustee,
this report must be execu	ited on behalf of the	corporation by the receiver of	JANStee, Luit	•	
	e.	***		•	
		RY _	Under penalty of	perium Lidechard and affirm t	that I have examined this report,
شقا	cii Fî	1 8 - 2			atements, and that all statements
				are true and correct.	. / _
File Date		2017	I. K. Ma	1100	1/17
	JAN 2 /	701 / / W	Signature	<u>,, , , , , , , , , , , , , , , , , , ,</u>	Date
Check No.		$\leftarrow (VV)$	Kellie J. Ma	rcil	
			Print or Type Nam		<u> </u>
By:			President	-	
FOR SECRETARY C	F STATE USE ONLY		Title		