



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

Matthew A. Brown, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 127610		2. Name of Corporation KMB Plumbing, Inc.			
3. Street Address Principal Business Office 71 Brook Street		City Warwick	State RI	Zip 02888	
4. Business Phone No. 401/261-0867		5. State of Incorporation RHODE ISLAND			6. SIC Code
7. Brief Description of the Character of Business Conducted in Rhode Island Plumbing subcontracting and contracting general construction, holding and managing investments and realty					
8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Kenneth Michael Brown			Vice President Name		
Street Address 71 Brook Street			Street Address		
City Warwick	State RI	Zip 02888	City	State	Zip
Secretary Name Kenneth Michael Brown			Treasurer Name Kenneth Michael Brown		
Street Address 71 Brook Street			Street Address 71 Brook Street		
City Warwick	State RI	Zip 02888	City Warwick	State RI	Zip 02888
9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
500 NO PAR VALUE			100 Shares		No Par

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



1 2 7 6 1 0

FILED	
File Date	APR 14 2005
Check No.	1569
By	KMB
FOR SECRETARY OF STATE USE ONLY	

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.

Kenneth Brown 4/5/05
Signature of Officer Date
Kenneth Brown
Print or Type Name of Officer
President
Title of Officer



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

Matthew A. Brown, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 127610		2. Name of Corporation KMB Plumbing, Inc.			
3. Street Address Principal Business Office 31 Pocasset Avenue Apt. 3			City Providence	State RI	Zip 02909
4. Business Phone No. 401/261-0867		5. State of Incorporation RHODE ISLAND			6. SIC Code
7. Brief Description of the Character of Business Conducted in Rhode Island Plumbing, subcontract, holding and managing investments and realty					
8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Kenneth Michael Brown			Vice President Name		
Street Address 31 Pocasset Avenue Apt 3			Street Address		
City Providence	State RI	Zip 02909	City	State	Zip
Secretary Name Kenneth Michael Brown			Treasurer Name Kenneth Michael Brown		
Street Address 31 Pocasset Avenue Apt 3			Street Address 31 Pocasset Avenue Apt 3		
City Providence	State RI	Zip 02909	City Providence	State RI	Zip 02909
9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
500 NO PAR VALUE			100 Shares		No Par

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



1 2 7 6 1 0

File Date	5/14/04
Check No.	1324
By:	Sc
FOR SECRETARY OF STATE USE ONLY	

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.

Kenneth Brown 4/18/04
Signature of Officer Date
Kenneth M Brown
Print or Type Name of Officer
President
Title of Officer



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

Edward S. Inman, III, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003

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

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 2. Name of Corporation

127610

KMB Plumbing, Inc.

3. Street Address Principal Business Office

31 Pocasset Avenue Apt. 3

City

State

Zip

Providence

RI

02909

4. Business Phone No.

5. State of Incorporation

6. SIC Code

401-261-0867

RHODE ISLAND

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

Plumbing, subcontract, holding and managing investments and realty

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name

Vice President Name

Kenneth Michael Brown

Street Address

Street Address

31 Pocasset Avenue Apt 3

City

State

Zip

City

State

Zip

Providence

RI

02909

Secretary Name

Treasurer Name

Kenneth Michael Brown

Kenneth Michael Brown

Street Address

Street Address

31 Pocasset Avenue Apt 3

31 Pocasset Avenue Apt 3

City

State

Zip

City

State

Zip

Providence

RI

02909

Providence

RI

02909

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

Director Name

Street Address

Street Address

City

State

Zip

City

State

Zip

Director Name

Director Name

Street Address

Street Address

City

State

Zip

City

State

Zip

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

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

AUTHORIZED SHARES

ISSUED SHARES

Number of Shares

Class/Series

Par Value

Number of Shares

Class/Series

Par Value

500 NO PAR VALUE

100 Shares

No Par

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



* 1 2 7 6 1 0 *

File Date: 4-17-03

Check No.: 1057

By: [Signature]

FOR SECRETARY OF STATE USE ONLY

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.

Kenneth Brown 3/30/03
Signature of Officer Date

Kenneth M Brown
Print or Type Name of Officer

President
Title of Officer