



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

Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **91417** 2. Name of Corporation **CLEAN ENVIRONMENT SERVICE CO., INC.**

3. Street Address Principal Business Office **15 Industrial Lane** City **Johnston** State **RI** Zip **02919**

4. Business Phone No. **401-272-9700** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **8888**

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

Provide Environmental Services Public+Private/Industrial Cleaning Services for Private Industries

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

President Name Raymond A. Simoneau	Vice President Name John Havoie
Street Address 14 Jenna Court	Street Address P.O. Box 40934
City Scituate State RI Zip 02857	City Providence State RI Zip 02940
Secretary Name	Treasurer Name

Street Address	Street Address
City	City
State	State
Zip	Zip

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	City
State	State
Zip	Zip
Director Name	Director Name
Street Address	Street Address
City	City
State	State
Zip	Zip

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

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value
500 SHS	NO	PAR VALUE

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

ISSUED SHARES

Number of Shares	Class/Series	Par Value
NONE		

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



* 9 1 4 1 7 *

File Date: **1/8**

Check No.: **4157**

By: **ec**

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.

Raymond A. Simoneau **1-4-01**
Signature of Officer Date

Raymond A Simoneau
Print or Type Name of Officer

President
Title of Officer



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

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



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1999

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.		2. Name of Corporation							
91417		CLEAN ENVIRONMENT SERVICE CO., INC.							
3. Street Address Principal Business Office		City	State	Zip					
2131 Plainfield Pike		Johnston	RI	02919					
4. Business Phone No.	5. State of Incorporation		6. SIC Code						
401-943-0100	Rhode Island								
7. Brief Description of the Character of Business Conducted in Rhode Island									
Evaluation, remediation and construction services related to environmentsl and real estate.									
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT)									
President Name		Vice President Name							
Raymond A. Simoneau		John E. Lavoie							
Street Address		Street Address							
2131 Plainfield Pike		705 Hatchery Road							
City	State	Zip	City	State	Zip				
Johnston	RI	02919	N. Kingston	RI	02852				
Secretary Name		Treasurer Name							
Raymond A. Simoneau		John E. Lavoie							
Street Address		Street Address							
2131 Plainfield Pike		705 Hatchery Road							
City	State	Zip	City	State	Zip				
Johnston	RI	02919	N. Kingstown	RI	02852				
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT)									
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 Shs NO PAR VLAUE				200		Common/N/A	None		

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

File Date: 1-25-99
Check No.: 2495
By: JD
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.

Raymond A. Simoneau
Signature of Officer Date
Raymond A. Simoneau
Print or Type Name of Officer
President
Title of Officer



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 1997

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 91417			2. Name of Corporation CLEAN ENVIRONMENT SERVICE CO., INC.		
3. Street Address Principal Business Office 1196 Chopmist Hill Road			City N. Scituate	State RI	Zip 02857
4. Business Phone No. 401-647-0622			5. State of Incorporation RHODE ISLAND		
6. SIC Code					
7. Brief Description of the Character of Business Conducted in Rhode Island Evaluation, remediation and construction services related to environmental issues and real estate					
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT)					
President Name Raymond A. Simoneau			Vice President Name John E. Lavoie		
Street Address 1196 Chopmist Hill Road			Street Address 705 Hatchery Road		
City N. Scituate	State RI	Zip 02857	City N. Kingstown	State RI	Zip 02852
Secretary Name Raymond A. Simoneau			Treasurer Name John E. Lavoie		
Street Address 1196 Chopmist Hill Road			Street Address 705 Hatchery Road		
City N. Scituate	State RI	Zip 02857	City N. Kingstown	State RI	Zip 02852
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT)					
Director Name None			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 AND ISSUED (*X* BOX FOR ATTACHMENT)					
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
500 SHS NO PAR VALUE			200	Common/N/A	None

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



File Date: 2-3-97
Check No.: 1087
By: WUP/sec

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.

Raymond A. Simoneau 1-30-97
Signature of Officer Date

Raymond A. Simoneau
Print or Type Name of Officer

President
Title of Officer