

1. Corporate ID No.

3. Street Address Principal Business Office

116022

File Date

Check No.

FOR SECRETARY OF STATE USE ONLY

2. Name of Corporation

ABC BUILDING CORPORATION

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

Zip

State

and that all statements contained herein are true and correct.

John Brooks

President

Title of Officer

Print or Type Name of Officer

10-05

Form 630 12/01

Date

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

PROFIT CORPORATION	ANNUAL REPURT	TUK 11	HE YEAK	
Filing Period: January 1 - March 1				
(FORM MUST BE TYPED IN BLACK)				

City

1077 Aguidneck	Avenue	•	Middletown	RI	02842	
Business Phone No.	_	5. State of Incorpor	ration		6. SIC Code	
401-849-6658		RHODE ISLA			34	
O ENGAGE IN THE		IING AND CONSTRU	JCTION MANAGEMENT BUSIN			
	RESSES OF THE OFF	ICERS C'X" BOX FOR	RATTACHMENT) [FILL IN SP.	ACES BEFORE USING AT	TACHMENTS	
resident Name			Vice President Name			
John Brooks			· None Street Address			
treet Address			Street Address			
7 Seascape Ave			· VC:-	State	17in	
City	State	Zip	City	State	Zip	
iddletown	RI	02842	Tréasurer Name			
cretary Name			JOhn Brooks			
ohn Brooks			* Street Address	·		
ireet Address	anua		.47 Seascape Avenue			
17 Seascape Ave		7:n	*City	State	Zip	
City	State RI	<i>Zip</i> 02842	. Middletown	RI	02842	
Middletown	1					
9. NAMES AND ADD Director Name	RESSES OF THE DIR	ECTORS ("X" BOX F	ORATTACHUEND DEFILL IN:	NEACES BEFORE, USING	ALIACIDADATA C.	
			· None			
John Brooks			Street Address			
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17 Seascape Ave		1	• <u>-</u>	State	Zip	
City	State	Zip	·City	Sidire	ZAP	
1iddletown	RI	02842				
Director Name			• Director Name • None			
None			• Street Address		 	
ireei Address			* Sireel Address			
	State	Zip	·City	State	Zip	
City	15.0.0	Lip.	•	J. J	'	
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his report must be.	signed in ink by eith	er the President, Vi	ce President, Secretary, Assi	siani secretary, ireas	arer, Receiver or ire	
1	DIR OLEN DRING HIDIT ILO					
					1 to	
			Under nechilty of ne	rjury, I declare and affirm	that I have examined	
1 1	0 0 6 6			g any accompanying scho		



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

Matthew A. Brown, Secretary of State

FOR SECRETARY OF STATE USE ONLY

Corporations Divisic 100 North Main Stre Providence, RI 02903-133 401.222.304

3. Street Address Principal Business Office 1077 Acquichneck Avenue 4. Business Phone No 401-849-6658 7. Brief Description of the Character of Business Conducted in Rhode Island TO ENGAGE IN THE GENERAL CONTRACTING AND CONST 8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FO President Name John Brooks Street Address 47. Seascape Avenue	City Middletown Portition ISLAND TRUCTION MANAGEMENT BUSIN	State RI ESS	21p 02842 6. SIC Code		
1 077 Acquichneck Avenue 1 Business Phone No 401-849-6658 7 Brief Description of the Character of Business Conducted in Rhoole Island TO ENGAGE IN THE GENERAL CONTRACTING AND CONST 3. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FO President Name John Brooks Street Address 47 Seascape Avenue	Middletown ISLAND TRUCTION MANAGEMENT BUSIN OR ATTACHMENT) FILL 1	RI	02842 6. SIC Code		
4. Business Phone No 401-849-6658 7. Brief Description of the Character of Business Conducted in Rhode Island TO ENGAGE IN THE GENERAL CONTRACTING AND CONST 3. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FO President Name John Brooks Street Address 47. Seascape Avenue	TRUCTION MANAGEMENT BUSING RATTACHMENT)	·	6. SIC Code		
401-849-6658 RHODE Brief Description of the Character of Business Conducted in Rhode Island TO ENGAGE IN THE GENERAL CONTRACTING AND CONST B. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FO President Name John Brooks Brief Address 47 Seascape Avenue	ISLAND TRUCTION MANAGEMENT BUSING RATTACHMENT) FILL 1	ES\$			
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S. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FO President Name John Brooks Irver Address 47 Seascape Avenue	R ATTACHMENT) FILL 1	ES\$			
John Brooks John Brooks Address 47 Seascape Avenue					
John Brooks Irea Addiress 47 Seascape Avenue	vice President Name	N SPACES BEFORE USI	NG ATTACHMENTS		
47 Seascape Avenue					
	None Street Address				
	Sectional Control				
Tity State Zip	City	State	Zip		
Middletown RI 02842					
ecretary Name	Treasurer Name		····		
John Brooks	John Brooks				
47 Seascape Avenue	Street Address	_			
ity State Zip	47 Seascape	Avenue State	7/6		
Middletown RI 02842	Middletown		Zip		
. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX F		RI IN SPACES BEFORE US	02842 SING ATTACHMEN		
Director Name	Director Name				
John Brooks	None				
	Struct Address		_		
47 Seascape Avenue	Cliv	State			
Middletown RI 02842	C.i.j.	State	Zip		
irector Name	Director Name				
None	None				
reet Address	Street Address				
Ity State Zip			<u>-</u>		
lty State Zip	City	State	2ip		
0. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)	:	 ("X" BOX FOR ATTAC	······································		
UTHORIZED SHARES	ISSUED SHARES	(A BOX FOR ATTAC	AMENI)		
lumber of Shares Class/Series Par Value	Number of Shares	Class-Series	Par Value		
8,000 NO PAR VALUE			_		
	100				
This report must be signed in ink by either the President.					

John Brooks
Print or Type Name of Officer

President
Title of Officer

Signdiure of Officer

1/20/04

Date

Edward S. Inman, III, Secretary of Sta. Corporations Divisio 100 North Main Street, Providence, RI 02903-133 401-222-304

2003 PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR _

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

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1. Corporate ID No.

2. Name of Corporation

116022

ARC RUIL DING COPPORATION

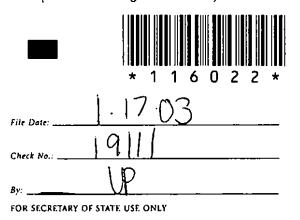
110022	ABC BUILDIN	G CURPURATION			
3. Street Address Principal Business	Office		City	State	ZIp
1077 Aquidned	ck Avenue	5. State of Incorporation	Middletown	RÍ	02842 6. SIC Code
401 849-6658	1	RHODE ISLAND			34
7. Brief Description of the Characte	r of Business Conducted in i	Rhode Island			
Contractor,	Building				
8. NAMES AND ADDRES President Name	SSES OF THE OFFIC	ERS ("X" BOX FOR ATTACH	MENT) FILL IN SPACES B Vice President Name	EFORE USING ATT	ACHMENTS
John Brooks Street Address		•	None Street Address		
47 Seascap	Avenue				
City	State	Zip	City	State	ZIp
Middletown	ŔI	02842			
Secretary Name			Treasurer Name		
John Brooks			None		
Street Address 47 Seascape	Avenue		Street Address		
City	State	Zip	City	State	Zip
Middletown	RI	02842			
9. NAMES AND ADDRES	SSES OF THE DIREC	CTORS ("X" BOX FOR ATTA	CHMENT) FILL IN SPACES Director Name	S BEFORE USING A	ITACHMENTS
John Brooks Street Address			None Street Address		
47Seascape A	venue State	Zip	City	State	Zip
Middletown Director Name	RI	02842	Director Name		
Street Address			None Street Address		
City	State	Zip	City	State	Zip

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

ISSUED SHARES

Number of Shares

100



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

Class/Series

Par Value

AUTHORIZED SHARES Number of Shares

8,000 NO PAR VALUE

Under pegalty 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. Signature di Officer Jơn <u>Brooks</u> Print or Type Name of Officer President

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

Class/Series



Form 630 12/02

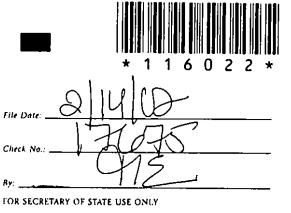
Par Value



Edward S. Inman, III. Secretary of Stat Corporations Divisio 100 North Main Street, Providence, RI 02903-133, 401-222-304

PROFIT CORP (Filing Period: January	ORATION A 1-March 1 • Fi	NNUAL REP	ORT FOR T	HE YEAR <u>2002</u>	PL INS
FORM MUST BE TYPED IN BLAC	CK)				
I. Corporate ID No.	2. Name of Corporation		•		`
118022	ABC BUILDING	CORPORATION			
3. Street Address Principal Business (1077 A GUU 4. Business Phone No. 401-849-465	idneck A	VENUE S. State of Incorporation RHODE ISLAND	middletou	LLW State RI	OJ-84 6. SIC Code
7. Brjaf Description of the Character)				0054,0
Contructor, B. Names and address	Building SES OF THE OFFICE	RS ("X" BOX FOR ATTACH:	MENT) FILL IN SPAC	ES BEFORE USING ATTACHM	IENTS
Fresident Name	0		Vice President Name		
Tohn M. (Drooks		Street Address	ONE	
47 Seuscu	ne Ave	Zip	City	State	Zip
Middle tower		07842	Treasurer Name	— . 0	
	. John P	brooks		John Br.	ooks
Sireer Address 47 Sease	upe Ave		Street Address 47	Segscape Ave	
Middleton	State RI	02842	City Middle fee	un Stote RI	02842
P. NAMES AND ADDRESS	ES OF THE DIRECT	ORS ("X" BOX FOR ATTAC	CHMENT) FILL IN SPA	CES BEFORE USING ATTACH	IMENTS
Virector Name	John	Brooks	Director Name	NOWE	
HT Seaso	cupe Ave		Street Address		
Middle taun	State RI	02842	City	State	Zip
Director Name	IWE		Director Name	NONE	
treet Aildress			Street Address	,,,,,,	
Sity	State	Zip	City	State	Zip
O. SHARES AUTHORIZED UTHORIZED SHARES) (*X* BOX FOR ATTACHI	MENT)	11. SHARES ISSUED	("X" BOX FOR ATTACHMENT)	
tumber of Shares 8,000 NO PAR VALUE	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
Alasa ila i VIII AVEAE			100		

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



Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all stayments contained herein are true and correct.

Form 630 12/01