



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 02903-13
401.222.36

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

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

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No 75627		2. Name of Corporation Mahoney's Fabrication Inc.			
3. Street Address Principal Business Office 300 Front Street			City Lincoln	State RI	Zip 02865
4. Business Phone No. (401) 726-5577		5. State of Incorporation RHODE ISLAND			6. SIC Code 1883
7. Brief Description of the Character of Business Conducted in Rhode Island TO FABRICATE, MANUFACTURE AND ASSEMBLE PRODUCTS.					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Alexander F. Davidow			Vice President Name Darrel A. Davidow		
Street Address 371 Pine Street			Street Address 371 Pine Street		
City Pawtucket	State RI	Zip 02860	City Pawtucket	State RI	Zip 02860
Secretary Name Betty Davidow			Treasurer Name Betty Davidow		
Street Address 371 Pine Street			Street Address 371 Pine Street		
City Pawtucket	State RI	Zip 02860	City Pawtucket	State RI	Zip 02860
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
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 ("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
100 COMM NO PAR VALUE			100	Common	No Par Value

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



File Date	1/19/05
Check No.	996
By:	DA
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.

Alexander F. Davidow 1/19/05
Signature of Officer Date

Alexander F. Davidow

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 Div's
100 North Main St
Providence, RI 02903-13
401.222.36

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

Filing Period: January 1 - March 1 • Filing Fee: \$50.00
(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 75627		2. Name of Corporation Mahoney's Fabrication Inc.	
3. Street Address Principal Business Office 300 Front Street		City Lincoln	State RI
4. Business Phone No. (401) 726-5577		5. State of Incorporation RHODE ISLAND	Zip 02865
6. SIC Code 1883			
7. Brief Description of the Character of Business Conducted in Rhode Island TO FABRICATE, MANUFACTURE AND ASSEMBLE PRODUCTS.			
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name Alexander F. Davidow		Vice President Name Darrel A. Davidow	
Street Address 371 Pine Street		Street Address 371 Pine Street	
City Pawtucket	State RI	City Pawtucket	State RI
Zip 02860		Zip 02860	
Secretary Name Betty Davidow		Treasurer Name Betty Davidow	
Street Address 371 Pine Street		Street Address 371 Pine Street	
City Pawtucket	State RI	City Pawtucket	State RI
Zip 02860		Zip 02860	
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
Director Name None		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			
AUTHORIZED SHARES			
Number of Shares	Class/Series	Par Value	
100 COMM NO PAR VALUE			
11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			
ISSUED SHARES			
Number of Shares	Class/Series	Par Value	
100	Common	No Par Value	

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



* 7 5 6 2 7 *

File Date **2/20/04**
Check No. **000004**
By: **SE**
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.

Signature of Officer **Alexander F. Davidow** Date **2-19-04**

Alexander F. Davidow
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 Div.
100 North Main Street, Providence, RI 02903-13
401-222-30

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. 75627 2. Name of Corporation Mahoney's Fabrication Inc.
3. Street Address Principal Business Office
300 Front Street / P.O. Box A City Lincoln, State RI Zip 02865
4. Business Phone No. (401) 726-5577 5. State of Incorporation RHODE ISLAND 6. SIC Code 1883

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

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

President Name <u>Alexander F. Davidow</u> Street Address <u>121 Macondry Street</u> City <u>Cumberland</u> State <u>RI</u> Zip <u>02864</u> Secretary Name <u>Betty Davidow</u> Street Address <u>121 Macondry Street</u> City <u>Cumberland</u> State <u>RI</u> Zip <u>02864</u>	Vice President Name <u>Darrel A. Davidow</u> Street Address <u>121 Macondry Street</u> City <u>Cumberland</u> State <u>RI</u> Zip <u>02864</u> Treasurer Name <u>Betty Davidow</u> Street Address <u>121 Macondry Street</u> City <u>Cumberland</u> State <u>RI</u> Zip <u>02864</u>
---	---

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

Director Name <u>None</u> Street Address City <u></u> State <u></u> Zip <u></u>	Director Name Street Address City <u></u> State <u></u> Zip <u></u>
Director Name Street Address City <u></u> State <u></u> Zip <u></u>	Director Name Street Address City <u></u> State <u></u> Zip <u></u>

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

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value
------------------	--------------	-----------

100 COMM NO PAR VALUE

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

ISSUED SHARES

Number of Shares	Class/Series	Par Value
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100 Common No Par Value

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



* 7 5 6 2 7 *

File Date: 1-29-03

Check No.: 9876

By: UP

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.

Alexander F. Davidow 01/28/03
Signature of Officer Date

Alexander F. Davidow
Print or Type Name of Officer

President
Title of Officer

5



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 02903-133
401-222-304



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 75627 2. Name of Corporation Mahoney's Fabrication Inc.
3. Street Address Principal Business Office 300 Front Street / P.O. Box A City Lincoln State RI Zip 02865
4. Business Phone No. (401) 726-5577 5. State of Incorporation RHODE ISLAND 6. SIC Code 1800 1073
7. Brief Description of the Character of Business Conducted in Rhode Island

Operate Metal Fabrication Business.

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

President Name <u>Alexander F. Davidow</u>	Vice President Name <u>Darrel A. Davidow</u>
Street Address <u>121 Macondry Street</u>	Street Address <u>121 Macondry Street</u>
City <u>Cumberland</u> State <u>RI</u> Zip <u>02864</u>	City <u>Cumberland</u> State <u>RI</u> Zip <u>02864</u>
Secretary Name <u>Betty Davidow</u>	Treasurer Name <u>Betty Davidow</u>
Street Address <u>121 Macondry Street</u>	Street Address <u>121 Macondry Street</u>
City <u>Cumberland</u> State <u>RI</u> Zip <u>02864</u>	City <u>Cumberland</u> State <u>RI</u> Zip <u>02864</u>

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

Director Name <u>None</u>	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)

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value
<u>100 COMM NO PAR VALUE</u>		

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

ISSUED SHARES

Number of Shares	Class/Series	Par Value
<u>100</u>	<u>Common</u>	<u>None</u>

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



* 7 5 6 2 7 *

Filer Date: 02-21-02

Check No.: 9328

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.

[Signature]
Signature of Officer Date

Alexander F. Davidow
Print or Type Name of Officer

President
Title of Officer



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

Corporations Divi
100 North Main Street, Providence, RI 02903-
401-222-3

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. **75627** 2. Name of Corporation **Mahoney's Fabrication Inc.**
3. Street Address Principal Business Office **c/o George M. Prescott, Esq** City **Lincoln** State **RI** Zip **02865**
300 Front Street/P.O. Box A
4. Business Phone No. **(401) 726-5577** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **1883**
7. Brief Description of the Character of Business Conducted in Rhode Island

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

President Name Alexander F. Davidow Street Address 121 Macondry Street City Cumberland State RI Zip 02864 Secretary Name Betty Davidow Street Address 121 Macondry Street City Cumberland, State RI Zip 02864	Vice President Name Darrel A. Davidow Street Address 121 Macondry Street City Cumberland State RI Zip 02864 Treasurer Name Betty Davidow Street Address 121 Macondry Street City Cumberland State RI Zip 02864
--	---

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

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

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

AUTHORIZED SHARES
Number of Shares Class/Series Par Value
100 COMM NO PAR VALUE

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

ISSUED SHARES
Number of Shares Class/Series Par Value
100 Common None

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



* 7 5 6 2 7 *

FILED

File Date: **JAN 18 2001**
Check No.: **101**

By: **1610 25725**
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.

Signature of Officer **Alexander F. Davidow** Date **1/11/01**
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 02903-1
401-222-31



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **75627** 2. Name of Corporation **Mahoney's Fabrication Inc.**
3. Street Address Principal Business Office **c/o Ronald W. Del Sesto** State **RI** Zip **02903**
49 Weybosset Street Providence
4. Business Phone No. **401/421-1492** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **1883**

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

Fabrication, manufacture and assembly of products

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

President Name	Vice President Name
Alexander F. Davidow	Darrel A. Davidow
Street Address	Street Address
121 Macondry Street	121 Macondry Street
City State Zip	City State Zip
Cumberland RI 02864	Cumberland RI 02864
Secretary Name	Treasurer Name
Betty Davidow	Betty Davidow
Street Address	Street Address
121 Macondry Street	121 Macondry Street
City State Zip	City State Zip
Cumberland RI 02864	Cumberland RI 02864

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)

AUTHORIZED SHARES

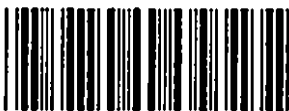
Number of Shares	Class/Series	Par Value
100 COMM NO PAR VALUE		

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

ISSUED SHARES

Number of Shares	Class/Series	Par Value
100	Common	None

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



* 7 5 6 2 7 *

FILED

File Date: JAN 20 2000

Check No.: By CC 9200

By: _____

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.

Alexander F. Davidow 1/5/00
Signature of Officer Date

Alexander F. Davidow
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 02903-1
401-277-31



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR **1998**

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.

75827

2. Name of Corporation

Mahoney's Fabrication Inc.

3. Street Address Principal Business Office c/o Ronald W. Del Sesto City

49 Weybosset Street

Providence

State

RI

Zip

02903

4. Business Phone No.

(401) 421-1492

5. State of Incorporation

RHODE ISLAND

6. SIC Code

1883

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

Fabrication, manufacture and assembly of products

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT)

President Name

Alexander F. Davidow

Vice President Name

Darrel A. Davidow

Street Address

121 Macondry Street

Street Address

121 Macondry Street

City

State

Zip

Cumberland

RI

02864

City

State

Zip

Cumberland

RI

02864

Secretary Name

Betty Davidow

Treasurer Name

Betty Davidow

Street Address

121 Macondry Street

Street Address

121 Macondry Street

City

State

Zip

Cumberland

RI

02864

City

State

Zip

Cumberland

RI

02864

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)

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

100 COMM NO PAR VALUE

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

ISSUED SHARES

Number of Shares

Class/Series

Par Value

100

Common

None

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



* 7 5 6 2 7 *

FILED

File Date: FEB 13 1998

Check No.: By: CC 6395

By: 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.

Signature of Officer: Alexander F. Davidow Date: 2/14/98

Alexander F. Davidow, President
Print or Type Name of Officer

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 02903-133
401-277-304

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. **75627** 2. Name of Corporation **Mahoney's Fabrication Inc.**

3. Street Address Principal Business Office **c/o Ronald W. Del Sesto** City **Providence** State **RI** Zip **02903**
49 Weybosset Street

4. Business Phone No. **(401) 421-1492** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code

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

Fabrication, manufacture and assembly of products

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT)

President Name	Vice President Name
Alexander F. Davidow	Darrel A. Davidow
Street Address	Street Address
121 Macondry Street	121 Macondry Street
City	City
Cumberland	Cumberland
State	State
RI	RI
Zip	Zip
02864	02864
Secretary Name	Treasurer Name
Betty Davidow	Betty Davidow
Street Address	Street Address
121 Macondry Street	121 Macondry Street
City	City
Cumberland	Cumberland
State	State
RI	RI
Zip	Zip
02864	02864

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT)

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 AND ISSUED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
100 COMM NO PAR VALUE			100	Common	None

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



FILED

5 6 2 7 *

File Date: **JAN 16 1997**

Check No.: **By 80#55-178499**

By: _____

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.

Alexander F. Davidow 1-13-97
Signature of Officer Date

Alexander F. Davidow, President
Print or Type Name of Officer

Title of Officer

PROFIT CORPORATION ANNUAL REPORT

1996



State of Rhode Island and Providence Plantations
James R. Langevin, *Secretary of State*
Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335 • (401) 277-3000

Filing Period: January 1-March 1

Filing Fee: \$50.00

PLEASE TYPE OR PRINT IN BLACK INK.

1. CORPORATE ID NO. 75627		2. NAME OF CORPORATION Mahoney's Fabrication Inc.			
3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE 1492 Turks Head Building		CITY Providence		STATE RI	ZIP CODE 02903
4. BUSINESS PHONE NO. (401) 421-2810		5. STATE OF INCORPORATION RHODE ISLAND			6. SIC CODE 8838

7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND
Fabrication, manufacture, and assembly of products

8. NAMES AND ADDRESSES OF THE OFFICERS					
PRESIDENT NAME Alexander F. Davidow			VICE PRESIDENT NAME Darrel A. Davidow		
STREET ADDRESS 121 Macondry Street			STREET ADDRESS 121 Macondry Street		
CITY Cumberland	STATE RI	ZIP CODE 02864	CITY Cumberland	STATE RI	ZIP CODE 02864
SECRETARY NAME Betty Davidow			TREASURER NAME Tanya R. Davidow		
STREET ADDRESS 121 Macondry Street			STREET ADDRESS 121 Macondry Street		
CITY Cumberland	STATE RI	ZIP CODE 02864	CITY Cumberland	STATE RI	ZIP CODE 02864

9. NAMES AND ADDRESSES OF THE DIRECTORS					
DIRECTOR NAME			DIRECTOR NAME		
STREET ADDRESS			STREET ADDRESS		
CITY	STATE	ZIP CODE	CITY	STATE	ZIP CODE
DIRECTOR NAME			DIRECTOR NAME		
STREET ADDRESS			STREET ADDRESS		
CITY	STATE	ZIP CODE	CITY	STATE	ZIP CODE

10. SHARES AUTHORIZED AND ISSUED					
AUTHORIZED SHARES			ISSUED SHARES		
NUMBER OF SHARES	CLASS / SERIES	PAR VALUE	NUMBER OF SHARES	CLASS / SERIES	PAR VALUE
100 COMM NO PAR VALUE			100	Common	none

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 statements contained herein are true and correct.

Signature of Officer

Alexander F. Davidow, President
Print or Type Name of Officer

File Date:

Check No:

By:

For Secretary of State Use Only

Title of Officer

Date

State of Rhode Island and Providence Planatations
Office of the Secretary of State
100 North Main Street
Providence, Rhode Island 02903-1333
401-277-3040

ANNUAL REPORT
Please Type or Print
File Annually - Jan. 1 - March 1
Filing Fee \$50.00

ALL ENTRIES MUST BE COMPLETED IN FULL OR THE FORM WILL BE RETURNED.

Corporate ID: 75627

Annual Report for the year: 1995

Name of Corporation: Mahoney's Fabrication Inc.

Business entity organized under the laws of the State of: Rhode Island

For foreign entity, address and telephone number of principal office:

Business Entity is (check one)

☒ Business Corporation (See RIGL Chapter 7-1.1)

☐ Professional Service Corporation

(See RIGL Chapter 7-5.1)

Brief statement of the character of business conducted
in Rhode Island:

Phone:

fabrication, manufacture, and assembly of
products

Address and telephone of the principal office of business entity in Rhode
Island (Provide street address - Not P.O. Box):

c/o Updike, Kelly, Spellacy & Del Sesto, 1492 Turks Head Building, Providence, RI 02903

Phone: 401/421-2810

THE NAMES OF THE OFFICERS ARE:

RESIDENT	STREET ADDRESS	CITY/STATE	ZIP CODE
Alexander F. Davidow	121 Macondry Street, Cumberland, RI	02864	
VICE PRESIDENT			
Darrel A. Davidow	121 Macondry Street, Cumberland, RI	02864	
SECRETARY			
Betty Davidow	121 Macondry Street, Cumberland, RI	02864	
TREASURER			
Tanya R. Davidow	121 Macondry Street, Cumberland, RI	02864	

FEB 21 1995
91659-CH-2631

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
------	----------------	------------	----------

NUMBER OF SHARES AUTHORIZED (Rider may be attached)

NUMBER OF SHARES ISSUED AND
OUTSTANDING (Rider may be attached)

Number of Shares	Class/Series	Number of Shares	Class/Series
100	Common	100	Common

Date: 2/8 1995

Mahoney's Fabrication Inc.

By 
Alexander F. Davidow, President

DESIGNATED REGISTERED AGENT FOR SERVICE OF PROCESS:

Ronald W. Del Sesto, Esq.
1492 Turks Head Building
Providence, RI 02903