



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

Matthew A. Brown, Secretary of State  
Corporations Division  
148 W. Ruer St  
Providence, RI 02904-2615  
401.222.3040

**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005**

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

\* 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(c&d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 130339		2. Name of Corporation BRISTOL CONCRETE CUTTING COMPANY			
3. Street Address Principal Business Office 14 WENDY DRIVE		City BRISTOL		State RI	Zip 02809
4. Business Phone No. 401-254-6161		5. State of Incorporation RI			
6. Brief Description of the Character of Business Conducted in Rhode Island CONCRETE AND ASPHALT CUTTING					
7. NAMES AND ADDRESSES OF THE OFFICERS: (*X* BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name MANUEL FURTADO			Vice President Name MANUEL FURTADO		
Street Address 14 WENDY DRIVE			Street Address 14 WENDY DRIVE		
City BRISTOL	State RI	Zip 02809	City BRISTOL	State RI	Zip 02809
Secretary Name MANUEL FURTADO			Treasurer Name MANUEL FURTADO		
Street Address 14 WENDY DRIVE			Street Address 14 WENDY DRIVE		
City BRISTOL	State RI	Zip 02809	City BRISTOL	State RI	Zip 02809
8. NAMES AND ADDRESSES OF THE DIRECTORS: (*X* BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name MANUEL FURTADO			Director Name		
Street Address 14 WENDY DRIVE			Street Address		
City BRISTOL	State RI	Zip 02809	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT) <input type="checkbox"/>			10. 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
1000 COMMON NO PAR VALUE			100 SHARES	COMMON	NO PAR

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

<b>FILED</b>	
File Date	FEB 07 2006
Check No.	
By	By <u>1289328</u>
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.

Manuel Furtado  
Signature  
Date  
MANUEL FURTADO  
Print or Type Name  
PRESIDENT  
Title



## 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 02903-1333  
401.222.304

## 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. 130339		2. Name of Corporation Bristol Concrete Cutting Co.			
3. Street Address Principal Business Office 390 METACOM AVE			City Bristol	State RI	Zip 02809
4. Business Phone No. 401-254-6161		5. State of Incorporation RHODE ISLAND			6. SIC Code
7. Brief Description of the Character of Business Conducted in Rhode Island CUTTING CONCRETE AND ASPHALT CUTTING					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name MANUEL FURTADO			Vice President Name MANUEL FURTADO		
Street Address 14 WENDY DR			Street Address 14 WENDY DR		
City Bristol	State RI	Zip 02809	City Bristol	State RI	Zip 02809
Secretary Name MANUEL FURTADO			Treasurer Name MANUEL FURTADO		
Street Address 14 WENDY DR			Street Address 390 METACOM AVE		
City Bristol	State RI	Zip 02809	City Bristol	State RI	Zip 02809
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name MANUEL FURTADO			Director Name		
Street Address 14 WENDY DR			Street Address		
City Bristol	State RI	Zip 02809	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"/>					
AUTHORIZED SHARES					
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1,000 NO PAR VALUE		0	NONE		
11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
ISSUED SHARES					
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value

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



\* 1 3 0 3 3 9 \*

File Date 6/14/04

Check No. 712

By: W.

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 Manuel Furtado 1/15/04

MANUEL FURTADO

Pres  
Title of Officer