



**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 140349		2. Name of Corporation National Resource Management, Inc.			
3. Street Address Principal Business Office 61 Endicott St, Bldg 32			City Norwood	State MA	Zip 02062
4. Business Phone No 781-235-8811		5. State of Incorporation MASSACHUSETTS			6. SIC Code
7. Brief Description of the Character of Business Conducted in Rhode Island MANUFACTURER, SELLER AND INSTALLER OF ENERGY CONSERVATION CONTROLS & Electrical Services					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Emre Schweighofer			Vice President Name OF Installations Augustine Pimentel		
Street Address 61 Dale St			Street Address 99 Tower St		
City Medfield	State MA	Zip 02052	City Fall River	State MA	Zip 02724
Secretary Name Emre Schweighofer			Treasurer Name Janette Schweighofer		
Street Address 61 Dale St			Street Address 61 Dale St		
City Medfield	State MA	Zip 02052	City Medfield	State MA	Zip 02052
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Emre Schweighofer			Director Name		
Street Address 61 Dale St			Street Address		
City Medfield	State MA	Zip 02052	City	State	Zip
Director Name Janette Schweighofer			Director Name		
Street Address 61 Dale St			Street Address		
City Medfield	State MA	Zip 02052	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
200,000	Common	No Par	100	Common	No Par

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



\*140349\*

File Date: DEC 30 2004  
Check No.: 30  
By: [Signature] 63531  
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.

Emre Schweighofer 12-29-04  
Signature of Officer Date  
Emre Schweighofer  
Print or Type Name of Officer  
President  
Title of Officer