

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Matthew A. Brown, Secretary of State

Corporations Physician 100 North Mehit Street Providence, RI 02903-133 401-222-3040

2005

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR \_\_\_\_\_

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

(FORM MUST BE TYPED OR PRINTED IN BIACK)

. Corporate ID No. 76457	2. Name of Corporation DEL GRANDE & N		.		;			
Sirver Address Principal Business Office 771 Reservoir Avenue			City Cranston	State RI	Zip   1   02910	i	;	1
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(401) 941-0900		5 State of Incorporation RHODE ISLAND			6. SIC Code   7658	.		
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Check No. 203	<i></i>		Anthony P. 1	DelGrande	- " ]		1	1
<sub>ву:</sub>			Print or Type Name of Off	cer		i		ī
		R .	President		•			4
FOR SECRETARY OF STAT	TE USE ONLY	•	Title of Officer	<del></del>				-
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Matthew A. Brown, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401.222.3040

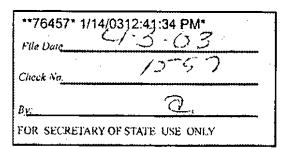
## PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

Filing Period: January 1 - March 1 • Filing Fee: \$50.00 (FORM MUST BE TYPED IN BLACK) 1. Corporate ID No. 2. Name of Corporation 76457 DEL GRANDE & MONTEFUSCO, INC. 3. Street Address Principal Business Office State Zip 771 RESERVOIR AVENUE CRANSTON RI 02910 4. Business Phone No. 5. State of Incorporation 6. SIC Code 4019420900 RHODE ISLAND 7658 7. Brief Description of the Character of Business Conducted in Rhode Island TO MAINTAIN, EXAMINE, INSPECT, AND AUDIT THE BOOKS AND ACCOUNTS OF OTHERS. 8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) | FILL IN SPACES BEFORE USING ATTACHMENTS President Name Vice President Name Anthony P. DelGrande Donald J. Montefusco Street Address Street Address 771 Reservoir Avenue .771 Reservoir Avenue City State Zip City State Zip Cranston RI 02910 Cranston RI 02910 Secretary Name Treasurer Name Anthony P. DelGrande Donald J. Montefusco Street Address Street Address 771 Reservoir Avenue .771 Reservoir Avenue City State Zip City State Zip Cranston RI 02910 . Cranston RI 02910 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) | FILL IN SPACES BEFORE USING ATTACHMENTS Director Name Director Name Anthony P. DelGrande Donald J. Montefusco Street Address Sirees Address 771 Reservoir Avenue 771 Reservoir Avenue City State Zip ·City Sate 7.јр Cranston 02910 RI Cranston RI 02910 Director Name Director Name Street Address Street Address State Cirv 210 State Zin 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 2,000 COMM NO PAR VALUE 200 Common No par value 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 any true and correct. \*76457\_DBC 01/15/04 11:48:55 AM\* File Doi 2 - / - 04 Check No. Anthony P. DelGrande Print or Type Name of Officer President FOR SECRETARY OF STATE USE ONLY Title of Officer Form 630 12/01



Edward S. Inman, 111, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335

*76457*		NDE & MONTEFUSC	CO, INC.		
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771 Reservoir Av	enue		.771 Reservoir	Avenue	
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Anthony P. DelGr	ande		Donald J. Mont	efusco	
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771 Reservoir Av	renue		771 Reservoir	Avenue	
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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 Anthony P. DelGrande
Print or Type Name of Officer President Title of Officer

Edward S. Inman, 111. Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

## PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002 Filing Period: January 1-March 1 • Filing Fee: \$50.00

76457 3. Street Address Principal Business 771 Reservoir A		<sup>itton</sup> DE & MONTEFUSCO, IN	_		
3. Street Address Principal Business 771 Reservoir A		DE & MONTEFUSCO. IN:			
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	trenije		city Cranston	State RI	zip 02910
4. Business Plione No.	· · · · · · · · · · · · · · · · · · ·	5. State of Incorporation		NJ.	6. SIC Code
4. Business Phone No. (401) 942-0900		RHODE ISLAI			7658
7. Bilef Description of the Character Accountants	of Business Conducted	in Rhode Island			
8. NAMES AND ADDRESS	SES OF THE OFF	ICERS ("X" BOX FOR ATT		S BEFORE USING ATTA	CHMENTS
President Name	10		Vice President Name		
Anthony P. De	tGrande		Donald J. Mor	iterusco	
771 Reservoir	Avenue		Street Address 771 Reservoir	Avenue	
City	State	Zip	City	State	Zip
Cranston	RI	02910	Cranston	RI 	02910
Secretary Name	,		Treasurer Name		
Anthony P. DelGra	inde .		Donald J. Mor	itefusco	•
Street Address 771 Reservoir Ave	enue		Street Address 771 Reservoir	Avenue	
City	State	ZIp	City	State	Zip
Cranston	RI	02910	Cranston	RI	02910
9. NAMES AND ADDRESS Director Name	SES OF THE DIR	ECTORS (*X* BOX FOR A	TTACHMENT) FILL IN SPAC	CES BEFORE USING ATT	TACHMENTS
Anthony P. DelGra	ınde		Donald J. Mont	:efusco	
Street Address			Street Address		
771 Reservoir Ave	enue		771 Reservoir	Avenue	
City	State	Zip	City	State	Zip
Cranston	RI	02910	Cranston	RI	02910
Director Name	• • • •		Director Name		
Street Address			Street Address		
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This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

Title of Officer **€** 5



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OR SECRETARY OF STAT	TE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined eport, including any accompanying schedules and statements, and Vall stay menty contained Herein are trug and correct. Anthony P. DelGrande Print or Type Name of Officer President

Form 630 12/01

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

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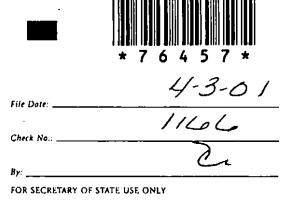
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1. Corporate ID No. **76457** 

2. Name of Corporation
DEI GRANDE & MONTEFUSCO

10431	DEL GRAND	E a MONTEPOSCO, I	110.		
3. Street Address Principal Busi	Iness Office		City	State	Zip
771 Reservoir	Avenue		Cranston	RI	02910
4. Business Phone No. 942-0900		5. State of Incorporation RHODE ISLAND			6. 4C Code
7. Brief Description of the Chai	racter of Business Conducted I	n Rhode Island			
Accountants					
8. NAMES AND ADDI	RESSES OF THE OFFI	CERS ("X" BOX FOR ATTACHE	MENT) FILL IN SPACE	S BEFORE USING ATTA	CHMENTS
President Name			Vice President Name		
Anthony P. Del	Grande	•	Donald J. Mont	efusco	
Street Address			Street Address		·
771 Reservoir	Avenue		771 Reservoir	Avenue	
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Cranston	RI	02910	Cranston	RI	02910
Secretary Name	_		Treasurer Name		
Anthony P. Del	Grande		Donald J. Mont	tetusco	
Street Address			Street Address	7	
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City	State	<sup>Ζiρ</sup> 02910	Cranston	State RI	02910
Cranston	RI		•		
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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 seport, including any accompanying schedules and statements, and all statements contained herein are trule and correct. Signature of Officer Anthony P. DelGrande

Print or Type Name of Officer

President

Title of Officer

James R. Langevin, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

### PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000-Filing Period: January 1-March 1 • Filing Fee: \$50.00

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(FORM MUST BE TYPED IN BLACK)

2. Name of Corporation

1. Corporate ID No.

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Avenue	5. State of Incorporation	Cranston	RI	02910 6. SIC Code
Business Conducted in Rha	RHODE ISLAND			7658
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venue		771 Reservoir	Avenue	
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RI	02910	Cranston Treasurer Name	RI	02910
Grande		Donald J. Mon- Street Address	tefusco	
venue		771 Reservoir	Avenue	
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venue		771 Reservoir	Avenue	
State	Zip	City	State	Zip
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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 begin are true and correct.

3, 2, 2000

Anthony P. Del Grande

Print or Type Name of Officer

President

Title of Officer

James R. Langevin, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1999
Filing Period: January 1-March 1 • Filing Fee: \$50.00

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1. Corporate ID No. <b>78457</b>	DEL GRAI	NDE & MONTEFUSC	O, INC.	·	Ė	
3. Street Address Principal Busine	ess Office	<del></del>	City	State	Zip	
771 Reservoir	Avenue		Cranston RI 02910			
4. Business Phone No.		5. State of Incorporati	on		6. SIC Code	
942-0900		RHODE ISL	AND		7658	
7. Brief Description of the Charac	ter of Business Conducted	in Rhode Island	<del></del>	<del></del>	<del></del>	
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City	State	Zip	City	State	Zip	
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ns report	must be signed in the by either the resider	in, vice riesident, secretary, Assistant secretary, measurer, Receiver or mustee
3.3		
		Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and
File Date:	War 23,99	that fall statements contain of the true and correct.
Check No.:	- 40 t	Signature of Officer Date ,
Bv:		Anthony P. Del Grande Print or Type Name of Officer
·	RY OF STATE USE ONLY	President



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 1998 Filing Period: January 1-March 1 • Filing Fee: \$50.00

STOP PLEASE READ INSTRUCTIONS

(FORM MUST BE TYPED IN BLACK)

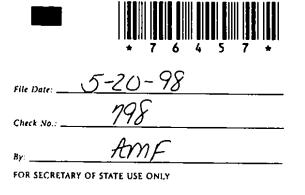
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1.	Corpo	rate ID	) No				

2. Name of Corporation

10401 3. Street Address Principal Business C	DEL GRANDE ( Office	& MUNTEFUSCO, IN	IG. City	State	Zip
771 Reservoir. A. Business Phone No.	Avenue	5. State of Incorporation	Cranston	RI	02910 6. SIC Code
942-0900 7. Brief Description of the Character of	of Business Conducted in Rho	RHODE ISLAND			7658
Accountants		ŧ			
8. NAMES AND ADDRESS	ES OF THE OFFICER	RS ("X" BOX FOR ATTACHN	IENT)		
President Name	Crando		Vice President Name Donald J. Mo:	ntofucco	
Anthony P. Del	Grande			iiterusco	
771 Reservoir A	Avenue		Street Address 771 Reservoi:	r Avenue	
City	State	Zip	City	State	Zip
Cranston	RI	02910	Cranston	RI	02910
Secretary Name	•		Treasurer Name	•	** * .
Anthony P. Del	Grande		Donald J. Mo	ntefusco	
Street Address 771 Reservoir A	Avenue		Street Address 771 Reservoi:	r Avenue	
City	State	Zip	City	State	Zip
Cranston	RI	02910	Cranston	RI	0 <sup>2/p</sup> 02910
9. NAMES AND ADDRESS:	ES OF THE DIRECTO	ORS ("X" BOX FOR ATTAC	HMENT)		
Director Name	Cwando		Director Name		
Anthony P. Del Street Address	Grande		Donald J. Mo	nterusco	
771 Reservoir A	Avenue		Street Address 771 Reservoi:	r Avenue	
City	State	Zip	City	State	715
Cranston	RI	02910	Cranston	RI	02910
Director Name	•	•	Director Name	•	• •
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED AUTHORIZED SHARES	(*X* BOX FOR ATTACHM	IENT)	11. SHARES ISSUED (	"X" BOX FOR ATTACHMENT)	
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
2,000 SHS COMM NO	PAR VAL		200	common	no par value
					•
• -					

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

Title of Officer



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

5, 1998

Significant Officer

Print or Type Name of Officer

President



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

• • • •						
PROFIT CO	RPORATI	ON ANNUAI  Filing Fee: \$50.0	REPORT 199	7	STOP PLEASE RI INSTRUCTION	AD ONS
FORM MUST BE TYPED IN	BLACK)				COMPLET	ING M
76457	2. Name of Corp DEL GRA	oration ANDE & MONTEFUS	CO, INC.	•		
 3. Street Address Principal Bus	Iness Office	•	City	State	ZIp	
747 Pontiac A	Avenue		Cranston	RI	02910	•
1. Business Phone No. 461–7747		S. State of Incorpora RHODE ISI			6. SIC Code <b>7658</b>	•
r. Brief Description of the Cha Accountants	racter of Business Conduct	ed in Rhode Island	· · · · ·	•		
B. NAMES AND ADD President Name	RESSES OF THE O	FFICERS ("X" BOX FOR A	TTACHMENT) ; Vice President Name	<b>.</b>		
Anthony P. De	el Grande		Donald J. Mo	ntefusco		
treet Address 747 Pontiac A	Avenue		Street Address 747 Pontiac	Avenue		
ranston	State RI	21p · 02910	Cranston	State RI	.02910	٠
ecretary Name			Treasurer Name			
Anthony P. De	el Grande _		Donald J. Mo	ntefusco		
treet Address 147 Pontiac F	lvenue		Street Address 747 Pontiac	Avenue		
Cranston	State RI	. 02910	Cranston	State RI	7.1p 02910	,
. NAMES AND ADD	RESSES OF THE D	 IRECTORS (*x* box for	ATTACHMENT)	•		
Director Name			Director Name	_		
Anthony P. De	el Grande		Donald J. Mo	ntefusco		
747 Pontiac A	Avenue		747 Pontiac	Avenue		•
City	State	Zip	City	· State	Zip	٠
Cranston	RI	02910	Cranston	RI	02910	
Strector Name			· Director Name		•••••••••••••••••••••••••••••••••••••••	• • • • • • • • •

2,000 SHS COMM NO PAR VAL 200 no par value common

ISSUED SHARES

Number of Shares

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

File Date:	3.11.97
Check No.:	0690
Ву:	14
FOR SECRETA	RY OF STATE USE ONLY

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

Class/Serles

AUTHORIZED SHARES

Number of Shares

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and tiall statements confained be ein are true and correct.

Anthony P. Del Grande Print or Type Name of Officer

President

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

iling Period: January iling Fee: \$50.00	1-March 1			Providence, Rhode Is	sland 02903-1335 • (401) 277-304
			PRINT IN BLACK INK.		
I. CORPORATE ID NO.	2. NAME OF CORPORATE	ОН			·
76457	DEL	GRANDE & MONTEFU	SCO, INC.		
3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE			άπ	STATE	ZIP COO€
747 Pontiac	Avenue		Cranston	RI	02910
BUSINESS PHONE NO.		5. STATE OF INCORPORATION			6. SIC COOE
461-7747 RHODE :		RHODE I	SLAND		7658
BREF DESCRIPTION OF THE CHARACTE	R OF BUSINESS CONOUCTED IN RH	ODE ISLAVIO			L
Accountants			•		
RESIDENT NAME	8 . N	AMES AND ADDE	ESSES OF THE OF	FICERS	
Anthony P. D	el Grande		Donald J. Montefusco		
747 Pontiac	Avenue		747 Pontiac A	venue	
ΠY	STATE	ZP COOE	ary	STATE	ZIP CODE
Cranston ECRETARY NAME	RI	02910	Cranston	RI	02910
Anthony P. Do	e <u>l Gr</u> ande	· · · · · · · · · · · · · · · · · · ·	Donald J. Mon	tefusco	
747 Pontiac	Avenue_		747 Pontiac A	venue	
IIY .	STATE	ZIP COOE	ατγ	STATE	ZIP CODE
Cranston	RI	02910	Cranston	RI	02910
RECTOR NAME Anthony P. De	<del>-</del>	AMES AND ADDE	DOSECTOR HAME  Donald J. Mon		<del></del> . <del>-</del>
TREET ADDRESS	er Grande	<del></del>	STREET ADDRESS	Letusco	<del></del>
747 Pontiac	Avenue		747 Pontiac A	venue	
ΠY	STATE	ZTP COOR	any	STATE	ZIP CODE
Cranston	RI	02910	Cranston	RI	02910
RECTOR HAME			ORECTOR NAME		
TREET ADDRESS		<del></del>	STREET ADDRESS		<del> </del>
			¶ ù		
ΠY	STATE	ZIP COOE	αιν	STATE	ZIP CODE
	<del></del>			<del> </del>	
*	1 0 Authorized Shares	•	IZED AND ISSUED	ISSUED SHARES	<del>-</del> - · · ·
23RAH2 70 R38MUM	CLASS / SERIES	PAR VALLE	NUMBER OF SHARES	CLASS / SERVES	PARVALLE
2,000 SHS COMM NO PAR VAL			200	common	no par value

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 an etalements of phrained herein are true and correct. 4/25/94 ature of Office

File Date:

Check No:

Ву:

Anthony P. Del Grande

Print or Type Name of Officer

President

Title of Officer

For Secretary of State Use Only

# State of Rhode Island and Providence Plantations Office of The Secretary of State 100 North Main Street Providence, Rhode Island 02903-1335 401-277-3040

ANNUAL REPORT

Please Type or Print File Annually – Jan. 1 - March 1

Filing Fee \$50.00 Make Checks Payable to: Secretary of State

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

Corporate ID:	Annual Report for the year:
Name of Corporation: DEL GRANDE & MC	
Business entity organized under the laws of the State of: RI	Business Entity is (check one):
For foreign entity, address and telephone number of principal office:	K   Business Corporation (See RIGL Chapter 7-1.1)
	Brief statement of the character of business conducted in Rhode Island:
Phone: ( )	accountants
Address and telephone of the principal office of business entity in Rh. Island (Provide street address - Not P.O. Box):  146 Westminster Street	de
Providence, RI 02903	
Phone: (401) 272-1312	
THE NA	ES OF THE OFFICERS ARE:
PRESIDENT	STREET AUDRESS CITY/STATE ZIP CODE
Anthony P. Del Grande 747 Po	STREET ADDRESS CITY/STATE 72P CODE
Donald J. Montefusco 747 Po	ntiac Avenue Cranston, RI 02910
	ALCODE
TREASURER 747 FC	STREET ADDRESS CITY/STATE ZIP CODE
	tiac Avenue Cranston, RI 02910
NAME THE NAM	STREET ADDRESS CITY/STATE ZIP CODE
Anthony P. Del Grande 747 Po	itiac Avenue Cranston, RI 02910
NAME	STREET ADDRESS CITY/STATE ZIP CODE
Donald J. Montefusco 747 Po	tiac Avenue Cranston, RI 02910
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
2,000 no par common	200 no par common
·- <u>-</u>	
Date April 19	By: July Whallz-
Fgrm 31 1/95	TPFESTERMENTS
DESIGNATED REGIST	RED AGENT FOR SERVICE OF PROCESS:
PLEASE NOTE: If the registered office and/or registered agent inc	

MARK A. MCSALLY 146 WESTMINSTER STREET PROVIDENCE RI 02903

FILED MAY 0 1 1995

MAY 0 1 1995 By <u>ce</u> 7537