



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 02903-1335
401.222.3040

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. 76457		2. Name of Corporation DEL GRANDE & MONTEFUSCO, INC.			
3. Street Address Principal Business Office 771 Reservoir Avenue			City Cranston	State RI	Zip 02910
4. Business Phone No. (401) 941-0900		5. State of Incorporation RHODE ISLAND			6. SIC Code 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) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Anthony P. DelGrande			Vice President Name Donald J. Montefusco		
Street Address 771 Reservoir Avenue			Street Address 771 Reservoir Avenue		
City Cranston	State RI	Zip 02910	City Cranston	State RI	Zip 02910
Secretary Name Anthony P. DelGrande			Treasurer Name Donald J. Montefusco		
Street Address 771 Reservoir Avenue			Street Address 771 Reservoir Avenue		
City Cranston	State RI	Zip 02910	City Cranston	State RI	Zip 02910
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Anthony P. DelGrande			Director Name Donald J. Montefusco		
Street Address 771 Reservoir Avenue			Street Address 771 Reservoir Avenue		
City Cranston	State RI	Zip 02910	City Cranston	State RI	Zip 02910
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
2,000 COMM NO PAR VALUE			200	common	no par
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



File Date	2-17-05
Check No.	2059
By:	LB
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
Anthony P. DelGrande
Print or Type Name of Officer
President
Title of Officer
Date
2005



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 02903-1335
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. 76457		2. Name of Corporation DEL GRANDE & MONTEFUSCO, INC.			
3. Street Address Principal Business Office 771 RESERVOIR AVENUE			City CRANSTON	State RI	Zip 02910
4. Business Phone No. 4019420900		5. State of Incorporation RHODE ISLAND			6. SIC Code 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) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Anthony P. DelGrande			Vice President Name Donald J. Montefusco		
Street Address 771 Reservoir Avenue			Street Address 771 Reservoir Avenue		
City Cranston	State RI	Zip 02910	City Cranston	State RI	Zip 02910
Secretary Name Anthony P. DelGrande			Treasurer Name Donald J. Montefusco		
Street Address 771 Reservoir Avenue			Street Address 771 Reservoir Avenue		
City Cranston	State RI	Zip 02910	City Cranston	State RI	Zip 02910
9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Anthony P. DelGrande			Director Name Donald J. Montefusco		
Street Address 771 Reservoir Avenue			Street Address 771 Reservoir Avenue		
City Cranston	State RI	Zip 02910	City Cranston	State RI	Zip 02910
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
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



7 6 4 5 7

76457 OBC 01/15/04 11:48:55 AM

File Date 3-1-04

Check No. 1831

By: 2

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

Anthony P. DelGrande

Print or Type Name of Officer

President

Title of Officer

Form 630 12/01



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 02903-1335
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. *76457*	2. Name of Corporation DEL GRANDE & MONTEFUSCO, INC.		
3. Street Address Principal Business Office 771 RESEVOIR AVENUE	City CRANSTON	State RI	Zip 02910
4. Business Phone No. 4019420900	5. State of Incorporation RHODE ISLAND	6. SIC Code 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) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Anthony P. DelGrande			Vice President Name Donald J. Montefusco		
Street Address 771 Reservoir Avenue			Street Address 771 Reservoir Avenue		
City Cranston	State RI	Zip 02910	City Cranston	State RI	Zip 02910
Secretary Name Anthony P. DelGrande			Treasurer Name Donald J. Montefusco		
Street Address 771 Reservoir Avenue			Street Address 771 Reservoir Avenue		
City Cranston	State RI	Zip 02910	City Cranston	State RI	Zip 02910

9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Anthony P. DelGrande			Director Name Donald J. Montefusco		
Street Address 771 Reservoir Avenue			Street Address 771 Reservoir Avenue		
City Cranston	State RI	Zip 02910	City Cranston	State RI	Zip 02910
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
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



* 7 6 4 5 7 *

**76457* 1/14/03 12:41:34 PM*

File Date 1-13-03

Check No. 1057

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
Anthony P. DelGrande
Print or Type Name of Officer
President
Title of Officer

Date
2/8/03



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 02903-1335
401-222-3040



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.

76457

2. Name of Corporation

DEL GRANDE & MONTEFUSCO, INC.

3. Street Address Principal Business Office

771 Reservoir Avenue

City

Cranston

State

RI

Zip

02910

4. Business Phone No.

(401) 942-0900

5. State of Incorporation

RHODE ISLAND

6. SIC Code

7658

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

Accountants

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

President Name

Anthony P. DelGrande

Vice President Name

Donald J. Montefusco

Street Address

771 Reservoir Avenue

Street Address

771 Reservoir Avenue

City

Cranston

State

RI

Zip

02910

City

Cranston

State

RI

Zip

02910

Secretary Name

Anthony P. DelGrande

Treasurer Name

Donald J. Montefusco

Street Address

771 Reservoir Avenue

Street Address

771 Reservoir Avenue

City

Cranston

State

RI

Zip

02910

City

Cranston

State

RI

Zip

02910

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

Director Name

Anthony P. DelGrande

Director Name

Donald J. Montefusco

Street Address

771 Reservoir Avenue

Street Address

771 Reservoir Avenue

City

Cranston

State

RI

Zip

02910

City

Cranston

State

RI

Zip

02910

Director Name

Street Address

City

State

Zip

Street Address

City

State

Zip

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

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

2,000 COMM NO PAR VALUE

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

ISSUED SHARES

Number of Shares

Class/Series

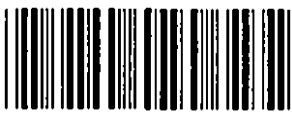
Par Value

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



* 7 6 4 5 7 *

File Date: 4-10-02

Check No.: 1341

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 of Officer

Anthony P. DelGrande

Date

2/18/02

Print or Type Name of Officer

President

Title of Officer

5

Form 630 12/01



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

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **76457** 2. Name of Corporation **DEL GRANDE & MONTEFUSCO, INC.**
3. Street Address Principal Business Office **771 Reservoir Avenue** City **Cranston** State **RI** Zip **02910**
4. Business Phone No. **942-0900** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **7858**

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

Accountants

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

President Name Anthony P. DelGrande Street Address 771 Reservoir Avenue City Cranston State RI Zip 02910	Vice President Name Donald J. Montefusco Street Address 771 Reservoir Avenue City Cranston State RI Zip 02910
Secretary Name Anthony P. DelGrande Street Address 771 Reservoir Avenue City Cranston State RI Zip 02910	Treasurer Name Donald J. Montefusco Street Address 771 Reservoir Avenue City Cranston State RI Zip 02910

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

Director Name Anthony P. DelGrande Street Address 771 Reservoir Avenue City Cranston State RI Zip 02910	Director Name Donald J. Montefusco Street Address 771 Reservoir Avenue City Cranston State RI Zip 02910
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
2,000 SHS COMM NO PAR VAL

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

ISSUED SHARES
Number of Shares Class/Series 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



* 7 6 4 5 7 *

File Date: 4-3-01
Check No.: 1166
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 of Officer [Signature] Date 1/25/01
Print or Type Name of Officer **Anthony P. DelGrande**
Title of Officer **President**



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 02903-1335
401-222-3040



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. **76457** 2. Name of Corporation **DEL GRANDE & MONTEFUSCO, INC.**
3. Street Address Principal Business Office **771 Reservoir Avenue** City **Cranston** State **RI** Zip **02910**
4. Business Phone No. **942-0900** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **7658**

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

Accountants

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

President Name Anthony P. Del Grande Street Address 771 Reservoir Avenue City Cranston State RI Zip 02910 Secretary Name Anthony P. Del Grande Street Address 771 Reservoir Avenue City Cranston State RI Zip 02910	Vice President Name Donald J. Montefusco Street Address 771 Reservoir Avenue City Cranston State RI Zip 02910 Treasurer Name Donald J. Montefusco Street Address 771 Reservoir Avenue City Cranston State RI Zip 02910
--	---

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

Director Name Anthony P. Del Grande Street Address 771 Reservoir Avenue City Cranston State RI Zip 02910 Director Name Donald J. Montefusco Street Address 771 Reservoir Avenue City Cranston State RI Zip 02910	Director Name Donald J. Montefusco Street Address 771 Reservoir Avenue City Cranston State RI Zip 02910 Director Name Donald J. Montefusco Street Address 771 Reservoir Avenue City Cranston State RI Zip 02910
---	--

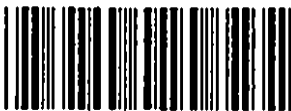
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES		
Number of Shares	Class/Series	Par Value
2,000 SHS COMM NO PAR VAL		

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

ISSUED SHARES		
Number of Shares	Class/Series	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



* 7 6 4 5 7 *

File Date: 3/31/00

Check No.: 1086

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] 3/20, 2000
Signature of Officer Date

Anthony P. Del Grande

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 02903-1335
401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1999

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

(FORM MUST BE TYPED IN BLACK)



1. Corporate ID No. 76457		2. Name of Corporation DEL GRANDE & MONTEFUSCO, INC.			
3. Street Address Principal Business Office 771 Reservoir Avenue			City Cranston	State RI	Zip 02910
4. Business Phone No. 942-0900		5. State of Incorporation RHODE ISLAND			6. SIC Code 7658
7. Brief Description of the Character of Business Conducted in Rhode Island Accountants					
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Anthony P. Del Grande			Vice President Name Donald J. Montefusco		
Street Address 771 Reservoir Avenue			Street Address 771 Reservoir Avenue		
City Cranston	State RI	Zip 02910	City Cranston	State RI	Zip 02910
Secretary Name Anthony P. Del Grande			Treasurer Name Donald J. Montefusco		
Street Address 771 Reservoir Avenue			Street Address 771 Reservoir Avenue		
City Cranston	State RI	Zip 02910	City Cranston	State RI	Zip 02910
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Anthony P. Del Grande			Director Name Donald J. Montefusco		
Street Address 771 Reservoir Avenue			Street Address 771 Reservoir Avenue		
City Cranston	State RI	Zip 02910	City Cranston	State RI	Zip 02910
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
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



* 7 6 4 5 7 *

File Date: W/Jan 23, 99
Check No.: 907
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] 3/9, 1999
Signature of Officer Date
Anthony P. Del Grande
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 02903-1335
401-277-3040



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.

2. Name of Corporation

76457

DEL GRANDE & MONTEFUSCO, INC.

3. Street Address Principal Business Office

771 Reservoir Avenue

City

Cranston

State

RI

Zip

02910

4. Business Phone No.

942-0900

5. State of Incorporation

RHODE ISLAND

6. SIC Code

7658

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

Accountants

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

President Name

Anthony P. Del Grande

Vice President Name

Donald J. Montefusco

Street Address

771 Reservoir Avenue

Street Address

771 Reservoir Avenue

City

Cranston

State

RI

Zip

02910

City

Cranston

State

RI

Zip

02910

Secretary Name

Anthony P. Del Grande

Treasurer Name

Donald J. Montefusco

Street Address

771 Reservoir Avenue

Street Address

771 Reservoir Avenue

City

Cranston

State

RI

Zip

02910

City

Cranston

State

RI

Zip

02910

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

Director Name

Anthony P. Del Grande

Director Name

Donald J. Montefusco

Street Address

771 Reservoir Avenue

Street Address

771 Reservoir Avenue

City

Cranston

State

RI

Zip

02910

City

Cranston

State

RI

Zip

02910

Director Name

Director Name

Street Address

Street Address

City

Cranston

State

RI

Zip

02910

City

Cranston

State

RI

Zip

02910

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

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

2,000 SHS COMM NO PAR VAL

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

ISSUED SHARES

Number of Shares

Class/Series

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



* 7 6 4 5 7 *

File Date: 5-20-98

Check No.: 798

By: AMF

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: [Signature] Date: 5/27, 1998

Anthony P. Del Grande

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 02903-1335
401-277-3040



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.

76457

2. Name of Corporation

DEL GRANDE & MONTEFUSCO, INC.

3. Street Address Principal Business Office

747 Pontiac Avenue

City

Cranston

State

RI

Zip

02910

4. Business Phone No.

461-7747

5. State of Incorporation

RHODE ISLAND

6. SIC Code

7658

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

Accountants

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

President Name

Anthony P. Del Grande

Vice President Name

Donald J. Montefusco

Street Address

747 Pontiac Avenue

Street Address

747 Pontiac Avenue

City

Cranston

State

RI

Zip

02910

City

Cranston

State

RI

Zip

02910

Secretary Name

Anthony P. Del Grande

Treasurer Name

Donald J. Montefusco

Street Address

747 Pontiac Avenue

Street Address

747 Pontiac Avenue

City

Cranston

State

RI

Zip

02910

City

Cranston

State

RI

Zip

02910

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

Director Name

Anthony P. Del Grande

Director Name

Donald J. Montefusco

Street Address

747 Pontiac Avenue

Street Address

747 Pontiac Avenue

City

Cranston

State

RI

Zip

02910

City

Cranston

State

RI

Zip

02910

Director Name

Street Address

City

State

Zip

Director Name

Street Address

City

State

Zip

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

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

2,000 SHS COMM NO PAR VAL

ISSUED SHARES

Number of Shares

Class/Series

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



* 7 6 4 5 7 *

File Date: 3.11.97

Check No.: 0020

By: ICP

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

Anthony P. Del Grande

Print or Type Name of Officer

President

Title of Officer

3/2, 1997

Date

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) 277-3040

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

PLEASE TYPE OR PRINT IN BLACK INK.

1. CORPORATE ID NO. 76457		2. NAME OF CORPORATION DEL GRANDE & MONTEFUSCO, INC.			
3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE 747 Pontiac Avenue		CITY Cranston	STATE RI		
		ZIP CODE 02910			
4. BUSINESS PHONE NO. 461-7747		5. STATE OF INCORPORATION RHODE ISLAND			
		6. SIC CODE 7658			
7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND Accountants					
8. NAMES AND ADDRESSES OF THE OFFICERS					
PRESIDENT NAME Anthony P. Del Grande		VICE PRESIDENT NAME Donald J. Montefusco			
STREET ADDRESS 747 Pontiac Avenue		STREET ADDRESS 747 Pontiac Avenue			
CITY Cranston	STATE RI	ZIP CODE 02910	CITY Cranston		
			STATE RI		
			ZIP CODE 02910		
SECRETARY NAME Anthony P. Del Grande		TREASURER NAME Donald J. Montefusco			
STREET ADDRESS 747 Pontiac Avenue		STREET ADDRESS 747 Pontiac Avenue			
CITY Cranston	STATE RI	ZIP CODE 02910	CITY Cranston		
			STATE RI		
			ZIP CODE 02910		
9. NAMES AND ADDRESSES OF THE DIRECTORS					
DIRECTOR NAME Anthony P. Del Grande		DIRECTOR NAME Donald J. Montefusco			
STREET ADDRESS 747 Pontiac Avenue		STREET ADDRESS 747 Pontiac Avenue			
CITY Cranston	STATE RI	ZIP CODE 02910	CITY Cranston		
			STATE RI		
			ZIP CODE 02910		
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
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 all statements contained herein are true and correct.

File Date:

4/25/96

Check No:

8242

By:

LC

For Secretary of State Use Only

Signature of Officer

Anthony P. Del Grande

Print or Type Name of Officer

President

Title of Officer

4/25/96
Date

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: 0076457 Annual Report for the year: 1995

Name of Corporation: DEL GRANDE & MONTEFUSCO, INC.

Business entity organized under the laws of the State of: RI

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)

Phone: ()

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

146 Westminster Street

Providence, RI 02903

Phone: (401) 272-1312

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

THE NAMES OF THE OFFICERS ARE:

	STREET ADDRESS	CITY/STATE	ZIP CODE
PRESIDENT <u>Anthony P. Del Grande</u>	<u>747 Pontiac Avenue</u>	<u>Cranston, RI</u>	<u>02910</u>
VICE PRESIDENT <u>Donald J. Montefusco</u>	<u>747 Pontiac Avenue</u>	<u>Cranston, RI</u>	<u>02910</u>
SECRETARY <u>Anthony P. Del Grande</u>	<u>747 Pontiac Avenue</u>	<u>Cranston, RI</u>	<u>02910</u>
TREASURER <u>Donald J. Montefusco</u>	<u>747 Pontiac Avenue</u>	<u>Cranston, RI</u>	<u>02910</u>

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
<u>Anthony P. Del Grande</u>	<u>747 Pontiac Avenue</u>	<u>Cranston, RI</u>	<u>02910</u>
<u>Donald J. Montefusco</u>	<u>747 Pontiac Avenue</u>	<u>Cranston, RI</u>	<u>02910</u>

NUMBER OF SHARES AUTHORIZED (Rider may be attached)

Number of Shares	Class / Series
<u>2,000</u>	<u>no par common</u>

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

Number of Shares	Class / Series
<u>200</u>	<u>no par common</u>

Date April 19, 1995

By: [Signature]

PRINT NAME OF OFFICER SIGNING
Anthony P. Del Grande
TITLE OF OFFICER SIGNING
President

Form 31 1/95

DESIGNATED REGISTERED AGENT FOR SERVICE OF PROCESS:

PLEASE NOTE: If the registered office and/or registered agent indicated below is incorrect, Form 9 must be filed.

MARK A. MCSALLY
146 WESTMINSTER STREET
PROVIDENCE RI 02903

FILED

MAY 01 1995

By ce 7537