

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

Matthew A. Brown, Secretary of State

FOR SECRETARY OF STATE USE ONLY

Corporations Division 100 North Main Street Providence, RI 02903-1335 401.222 3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR	ROFIT	CORPORATI	ON ANNIIAL E	REPORT FOR	THE VEAR
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2005

1. Corporate ID No.	2. Name of Corp	uration			•
70168	SWB INDU	STRIES, INC.			
3 Sinci Address Principal Bi 1000 Knotty	osiness Office Oak Road		^C Hope	s _{rate} RI	^{Zip} 02831
4. Business Phone No. 401 - 821 - 333	7	5. State of Incorporation RHODE ISLAN			6 SIC Code 6638
7. Brief Description of the Chi OPERATING A TI	nractor of Business Conduc RUCKING AND CONST	ted in Rhode Island TRUCTION COMPANY.			
8. NAMES AND ADDR	esses of the offic	CERS: ("X" BOX FOR AT	TACHMENT) TILLI	N SPACES BEFORE USIN	G ATTACHMENTS
Shane W. Be	ttez		Vice President Name Seth W. Be	ettez	
Street Address P.O. Box 29	9		Street Address Box 2	299	
Giy Hope	State RI	χ _{ιμ} 02831	Gity Hope	State R I	^{Zip} 02831
Secretary Name Shane W. Be	ttez		Treasurer Name Shane W. E	Bettez	
Sinci Address same as abo	ve		Sinvi Address same as ak	oove	
City	State	Zip	City	State	Zψ
Cdy Director Name	State	Zip	City Director Name	State	Zip
Street Address	 		Striet Address		
City	I 6	Tur.			
ni.	State	Zip	City:	State	Zιρ
10. SHARES AUTHORI	ZED ("X" BOX FOR	ATTACHMENT)	11. SHARES ISSUED	C'X" BOX FOR ATTAC	HMENT)
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Sertes	Par Value
600 COMM NO PAR V	ALUE		600	common	no par
This report mu	st he signed in into he	v oither the President Mice	President, Secretary, Assi	signt Secretary Treasurer	Receiver or Trustee
	oo argineo iii iiik o	y evener the Freshdent, vice	rreadent, decretary, risa	sum occretary, reasoner,	, received of musice
		1600	Under cenalty of	perjury, I declare and affirm	that have examined this
File Date 2 9	105	168*	contained hereit	ompanying schedules and sta are true and conject	/- S-C
Check No. 394	0		Silvature of Office. Shane		Date
D 1 Å			Print or Type Nam		
p \ \ A					

Title of Officer



1. Corporate ID No.

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

Corporations Division 100 North Main Street Providence, KI 02903-1335 401.222.3040

Matthew A. Brown, Secretary of State

2. Name of Corporation

ROFIT	CORPOR	ATION	ANNUAL	REPORT	FOR	THE	YEAR	
NULLI	CONI ON	ALIUN	ANNUAL	VEI OVI	ION		ILDAN.	

2004 Filing Period: January 1 - March 1 • Filing Fee: \$50.00 (FORM MUST BE TYPED OR PRINTED IN BLACK)

/0168	2MR INDOZIKI	ES, INC.			
3 Street Address Principal Business O 1000 Knotty Oal	r Road		Hope Hope	Siate R I	^{Zip} 02831
4. Business Phone No.	-	5 State of Incorporation			6 SIC Code
401-821-3337		RHODE ISLAND		<u></u>	6638
7. Brief Description of the Character of OPERATING A TRUCKIN	of Business Conducted in I IG AND CONSTRUCT	Rhode Island ION COMPANY.			
8. NAMES AND ADDRESSES	OF THE OFFICERS	("X" BOX FOR ATTA	CHMENT) FILL IN	SPACES BEFORE USIN	G ATTACHMENTS
President Name Shane W. Bette	z	- · ·	Vice President Name Seth W. Be	ttez	
Street Address P.O. Box 299			Sirver Address P.O. Box 2	99	
City Hope	State RI	02831	<i>c</i> ity Hope	State R I	^{Ζφ} 02831
Secretary Name			Treasurer Name		
Shane W. Bette	Z		Shane W. B	ettez	
Street Address			Street Address		
same as above	т.		same as ab		140
Chy	State	Zip	City	State	Ζίρ
9. NAMES AND ADDRESSES	OF THE DIRECTOR	 S. T. Y. ROY FOR AT	TACHMENT') FILL	IN SPACES BEFORE US	ING ATTACHMENTS
Director Name	OF THE DIRECTOR	IO. (A BOA FOR AL.	Director Name	or on a con	
Shane W. Bette	7 .			•	
Street Address	-		Street Address		<u></u>
			,		
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 ATT	ACHMENT)	11. SHARES ISSUED	("X" BOX FOR ATTACE	HMENT)
AUTHORIZED SHARES	(2002 2000 2000	,	ISSUED SHARES	<u> </u>	
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
600 COMM NO PAR VALUE			600	common	no par
This report must be s	signed in ink by eith	ner the President, Vice F	resident, Secretary, Assis	stant Secretary, Treasurer,	Receiver or Trustee
1 18861 18	Ind noise deric diene en en die	11			
* 7			Under penalty of i	perjury, I declare and assum companying schedules and st	that I have examined this repo
File Date	ED		1 12	ye true and correct.	3-22-04
Check NoAPR	2 2004	V~	Signature of Officer Shane V	N. Bettez	Date
By:By	Mr cale 42	7	Print or Type Name		
FOR SECRETARY OF ST	ATE USE ONLY		Preside Title of Officer	ent _.	Form 630 Rev. 12/03
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PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003

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Hing	Period	: lanuarv	1-March 1 •	Filing Fee: \$50.00		



Filing Perioa: January	I-Marin I	Tilling Fee: \$30.00			INSTRUCTIONS
(FORM MUST BE TITTED OR PRINT	ED IN BLACK)				
1. Corporate ID No.	2. Name of Corporation	ı)	·		
70168	SWB INDUSTR	RIES, INC.			
3. Street Address Principal Business	Office		City	State	Zip
1000 Knotty Oak F	≀oad	5. State of Incorporation	Норе	RI	02831-0299 6. SIC Gode
401-822-2500 7. Brief Description of the Character	of Business Conducted in i	RHODE ISLAND			75
			and any other lawfu MENT) FILL IN SPACES BEI Vice President Name Shane W. Bettez		HMENTS
Sireet Address 1000 Knotty Oak F	Road	•	Street Address 1000 Knotty Oak	Road	
Hope	State RI	^{Zip} 02831-0299	Hope	State RI	02831 - 0299
Shane W. Bettez			Teasurer Name Michael Picozzi		
1000 Knotty Oak F	Road		Street Address 1000 Knotty Oak	Road	
Hope	State RI	02831 - 0299	Hope	State RI	12ip 02831-0299
9. NAMES AND ADDRES	SES OF THE DIREC	TORS ("X" BOX FOR ATTA	CHMENT) FILL IN SPACES F	BEFORE USING ATTA	ACHMENTS
Michael Picozzi Street Address 1000 Knotty Oak B	Road		Director Name Street Address		
City	State	ХIр	City	State	Zip
Hope Director Name	RI .	02831-0299	Director Name	,	
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZE	D (*x * BOX FOR ATTAC	HMENT) 🗖	11. SHARES ISSUED ('X'	BOX FOR ATTACHMENT	יין ט
Number of Shares	Class/Serles	Par Value	Number of Shares	Class/Series	Par Value
600 COMM NO PAR VALU	JE		600	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

€> 5

	* 7 0 1 6 8 *
File Date:	3.6.03
Check No.:	587
By:	1119
FOR SECRETAR	RY OF STATE USE ONLY

Under penalty of perjury, I declare and a this report, including any accompanying	schedules and statements, and
that all statements contained herein are	true and correct.
Muhul Cum	03/05/03
Signature of Officer	Date
Michael Picoz <u>zi</u>	
Print or Type Name of Officer	
President	

Ferni 630 12/02

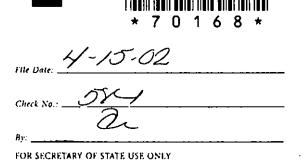


Edward S. Inman, III. Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002

STOP PET ASE READ ENSERT ETIONS

Filing Period: January	1-March 1 •	Filing Fee: \$50.00			INSTRUCTION
GORM MUST BE TYPED IN BLA	CK)				
1. Corporate ID No.	2. Nume of Corporat	ion			
70168	SWB INDUST	RIES, INC.			
3. Street Address Principal Business		,	City	State	Zip
1000 Knotty Oak R	load		Hope	RI	02831-0299
4. Business Phone No.		5. State of Incorporation	•		6. SIC Code
401-822-2500		RHODE ISLAND			75
7. Brief Description of the Character	of Business Conducted In	Rhode Island			
Operating a truck	ing and cons	truction company a	and any other la	wful business.	
8. NAMES AND ADDRES					HMENTS
President Name	- ·- · -		Vice President Name		
Michael Picozzi			Shane W. Bett	ez	
Street Address			Street Address		
1000 Knotty Oak R	Road		1000 Knotty C	Oak Road	
Clly	State	Zip	Cuy	State	Zip
Норе	Ri	02831-0299	Норе	RI	02831-0299
Secretary Name			Treasurer Name		**********************
Shane W. Bettez			Michael Picoz	zi	
Street Address			Street Address		
1000 Knotty Oak F	Road		100 Knotty Oa	ak Road	
City	State	Zip	Cay	State	Zip
Норе	RI		Hopr	RI	02831-0299
9. NAMES AND ADDRES	SES OF THE DIRE	CTORS ("X" BOX FOR ATTAC		CES BEFORE USING ATTA	CHMENTS
Director Nome			Director Name	· · · ·	
Michael Picozzi					
Street Address			Street Address		
1000 KNotty Oak F	Road				
Clly	State	ZIp	Cuy	State	ZIp
Норе	RI	02831-0299	•		
Director Name	***		Director Name	•	*** **** * * * * * * * * * * * * * * * *
			:		
Street Address			Street Address		
			•		
City	State	Zip	; City	State	Zip
			‡		
10. SHARES AUTITORIZE	_	(CHMENT)	11. SHARES ISSUED	(*X* BOX FOR ATTACHMENT	
AUTHORIZZI) SHARES		-	ESSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Serles	'Par Value
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TO COMMITTE I AIL TALE	_		600	Соптоп	No Par Value
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			1		



Under penalty of perjury, I declare and affirm that this report, including any accompanying schedul	
that all statements contained herein are true and	correct.
Muhiuplum	3/15/02
manuscript of the contract of	Date
LICHAEL PICOZZI	
Print of Type Name of Officer	
Pres	
Title of Officer	
A CONTRACTOR OF THE CONTRACTOR	Form 630 12/01

FOR SECRETARY OF STATE USE ONLY

Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001

STOP

(FORM MUST RE TYPED IN		Filing Fee: \$50.00			INSTRUCTION
1. Corporate ID No.	2. Name of Corpe	pration		<u> </u>	
70168	SWB INDU	ISTRIES, INC.			
3. Street Address Principal Bus	iness Office	·	City	State	Zip
1000 Knotty Oa	k Road		Норе		i '
4. Business Phone No.		5. State of Incorporation	-iiope	RI	02831-0299
401-822-2500	-— 	RHODE ISLAN	•		75
7. Brief Description of the Chai	racter of Rusiness Conducted	i in Rhode Island			
operating a tru	ucking and con	struction company	and any other 1	lawful business.	
President Name	RESSES OF THE OF	FICERS ("X" BOX FOR ATTAC	HMENT) LIFILL IN SPAC	ES BEFORE USING ATTAC	HMENTS
Michael Picozzi			Vice President Name		· · · · · · · · · · · · · · · · · · ·
Street Address	L •••		Shane W. Bett	ez	
1000 Knotty Oal	Pond		Street Address		
City Car	State	Zip	<u>:1000 Knotty O</u>		
Hope	RI	02831-0299	Gity	State	Zip
Secretary Name	*********************	02031-0299	Hope Treasurer Name	RI	02831-0299
Shane W. Bettez	2		Michael Picoz	a i	
Street Address			Street Address	21	
1000 Knotty Oak	Road		1000 Knotty O	ak Road	
City	State	Zip	Gio	State	Zip
Норе	RI	02831-0299	Норе	рт	02024 0000
9. NAMES AND ADDR	ESSES OF THE DIR	ECTORS ("X" BOX FOR ATIA	CHMENT) FILL IN SPA	CES BEFORE USING ATTA	CHMENTS
			Director Name		CHILIATIS
Michael Picozzi	 		:		
	D 1		Street Address		
1000 Knotty Oak		·	b	•	
Норе	State	ZIp	City	State	Zip
Director Name	RI	02831-0299	•		•
			Director Name	:	
Street Address	· • · · · · ·	···	: :		
			Street Address		
City	State	Zip	City		
	; ;	1	City	State	Zip
10. SHARES AUTHORIZ	ZED ("X" BOX FOR ATT	ACHMENT)	11 SHADES ISSUED	(*X* BOX FOR ATTACHMENT)	
AUTHORIZED SHARES			ISSUED SHARES	CA BOX FOR ATTACHMENT)	<u> Ш</u>
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
600 SHS COMM N	O PAR VALUE			Olassy Strik's	rai value
			600	Common	No Par Value
					110 Tal Value
					
his report must be sig	ened in ink by oith	ner the President Vice D	rosidant Co		
		ner the President, Vice Pr	resident, Secretary, As	ssistant Secretary, Treasu	rer, Receiver or Trusted
		! i l			
	7 (08)) 88(8) (18)8 8(8) 18 <u>)</u> 1		i	· . 6	
* · · · · · · · · · · · · · · · · · · ·	70168	k	Under penalty of p	perjury, I declare and affirm	that I have examined 🧠
e/s	0		this report, includ	ing any accompanying sched	fules and statements, and
File Date:	0	1	triat au spirtements	s contained herein are true a	na correct.
x1 1	<u> </u>		MUUUU	1 Cum	02/15/01
261			Signature of Officer		Date

Michael Picozzi

Print or Type Name of Officer

President

Title of Officer



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

(FORM MUST BE TYPED IN BLACK)

FOR SECRETARY OF STATE USE ONLY

1. Corporate ID No. 70168

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

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000

401-222-3040

3. Street Address Principal Business Office 1000 Knotty Oak Road 02831-0299 Hope RI 4. Business Phone No. State of Incorporation RHODE ISLAND 6. SIC Code 401-822-2500 7. Brief Description of the Character of Business Conducted in Rhode Island Operating a trucking and construction company and any other lawful business 8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Vice President Name President Name Michael Picozzi Shane W. Bettez Street Address Street Address 1000 Knotty Oak Road 1000 Knotty Oak Road City City Hope RI 02831-0299 Hope RI 02831-0299 Secretary Name Treasurer Name Shane W. Bettez Michael Picozzi Street Address Street Address 1000 Knotty Oak Road 1000 Knotty Oak Road City Zip 2.10 02831-0299 Hope RI 02831-0299 FILL IN SPACES BEFORE USING ATTACHMENTS 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) Director Name Director Name Michael Picozzi Street Address Street Address 1000 Knotty Oak Road Zip State State City City Hope 02831-0299 RΙ Director Name Director Name Street Address Street Address Zip City City State State Zin 10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) 11. SHARES ISSUED (*X* BOX FOR ATTACHMENT) AUTHORIZEE) SHARES ISSUED SHARES Number of Shares Number of Shares Class/Series Par Value Par Value Class/Series 600 SHS COMM NO PAR VALUE 600 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 eport, inoluging any accompanying schedules and statements, and

02715/00

Date

that all statements contained herein are true and correct.

Shane W. Bettez Print or Type Name of Officer <u> Vice President</u>

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

1. Corporate ID No. 70168	2. Name of Corporal SWB INDUS	TRIES, INC.	_				
3. Street Address Principal Bus	Iness Office		City	State	Zip		
1000 Knotty	Oak Road		Hope	RI	02831-0299		
4. Business Phone No.		5. State of Incorporation	_	· · · · · · · · · · · · · · · · · · ·	6. SIC Code		
401-822-250		RHODE ISLAN	D		75		
7. Bilef Description of the Char Operating a			any and any othe	r lawful business			
8. NAMES AND ADD	RESSES OF THE OFFI	CERS (*x* box for attac	HMBNT) 🔲 FILL IN SPACI	ES BEPORE USING ATTAC	IMENTS 😅 🖽		
President Name			Vice President Name				
Michael Pic	ozzi		Shane W. Bettez				
Street Address			Street Address				
1000 Knotty	Oak Road		1000 Knotty	Oak Road			
City	State	Zip	City	State	Zip		
Норе	RI	02831-0299	Норе	RI	02831-0299		
Secretary Name			Treasurer Name				
Shane W. Bettez			Michael Pico	zzi			
Street Address			Street Address				
1000 Knotty	Oak Road	<u> </u>	1000 Knotty	Oak Road			
City	State	Zip	City	State	Zip		
Hòpe	RI	02831-0299	Норе	RI	02831-0299		
	RESSES OF THE DIRE	CTORS (*X* BOX FOR A'TT		CES BEFORE USING ATTA	CHMENTS		
Director Name			Director Name				
Michael Pic	ozzi		<u> </u>				
Street Address			Street Address				
1000 Knotty			<u> </u>				
City	State	Zip	Clly	State	Zip		
Норе	RI	02831-0299					
Director Name			Director Name				
	 –——.—				,		
Street Address			Street Address				
					21-		
City	State	Zip	City	State	Zip		
City				Z			
·	12111 (11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)				
10. SHARES AUTHOR	IZED ("X" BOX FOR ATTA	CHMENT)					
10. SHARES AUTHOR AUTHORIZED SHARES			ISSUED SHARES		L Book Mark of		
10. SHARES AUTHOR	IZED (*X* BOX FOR ATT) Class/Seiles	CHMENT) Par Value		Class/Series	Par Value		
10. SHARES AUTHOR AUTHORIZED SHARES	Class/Serles		ISSUED SHARES Number of Shares				
10. SHARES AUTHOR AUTHORIZED SHARES Number of Shares	Class/Serles		ISSUED SHARES	Class/Series Common			
10. SHARES AUTHOR AUTHORIZED SHARES Number of Shares	Class/Serles		ISSUED SHARES Number of Shares				
10. SHARES AUTHOR AUTHORIZED SHARES Number of Shares	Class/Serles		ISSUED SHARES Number of Shares		Par Value No Par Value		

		Under penalty of this report, includ
File Date:	Olfar 17,99	that all statement
Check No.:	1	Michael Pic
By:	OF STATE USE ONLY	Print or Type Name of President
		Title of Officer

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.

03/03/99 Date

ozzi Officer



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

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1998

STOP PLEASE READ INSTRUCTIONS

(FORM MUST BE TYPED I	N BLACK)				
1. Corporate ID No.	2. Name of Corpora	flon			
70168	SWB-INDUS	TRIES, INC.			· · · · · · · · · · · · · · · · · · ·
1000 Knotty		•	, City Hope	State RT	02831-0299
4. Business Phone No.		5. State of Incorporation	nope		
401-822-2500	1				6. SIC Code
7. Brief Description of the Ch	garacter of Rusiness Conducted i	RHODE ISLAN	D		0075
Operating a	trucking and co	nstruction compar	ny and any other :	lawful business.	
		CERS ("X" BOX FOR ATTAC		<u> </u>	
President Name		<u> </u>	Vice President Name		· · · · · · · · · · · · · · · · · · ·
Michael Pico	ozzi		Shane W. Bette	ez	
Street Address			Street Address		
1000 Knotty	Oak Road	<u> </u>	1000 Knotty O	ak Road	
Clty	State	Zip	City	State	Zip
Норе	RI	02831-0299	Норе	RI	02831-0299
Secretary Name			Treasurer Name		
Shane W. Bet	t <u>tez</u>		: Michael Picoz	zi	
Street Address			Street Address		
1000 Knotty		·- 	1000 Knotty 0:	······································	
City	State RI	02831-0299	City	State	02831-0299
Hope AND ADD		ECTORS (*X* BOX FOR ATT	Норе		02031 0233
Director Name	AKESSES OF THE DIKE	ECTORS CY BOX FOR ALL	Director Name	-	
Michael Pico	777 i				
Street Address		· 	Street Address		· · · · · · · · · · · · · · · · · · ·
1000 Knotty	Oak Road	•			
City	State	Zip	City	State	Zip
Норе	RI	02831-0299		· ·	
Director Name	••••••••••••••••	···	Director Name	• • • • • • • • • • • • • • • • • • • •	······································
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Street Address			Street Address		•
City	State	7 210	Clty	State .	2.1p
3.1,	311114	, y	- (11)	State .	
10. SHARES AUTHOR	RIZED (*X* BOX FOR ATT)	ACHMENT)	11. SHARES ISSUED	("X" BOX FOR ATTACHMENT	70
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
				Common	No Par Value
600 SHS COMM	NO PAR-VALUE-		600	Common	110 Tal value
		<u> </u>	<u> </u>	<u> </u>	
T'le ! a a . a	ATALAN CARAGONIA				- . - .

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

	7_0_1_
File Date:	2098
Check No.:	450
By: FOR SECRETARY O	OF STATE USE ONLY

Under penalty of this report, Inclu- that all statement	ding any accomp	panying sched	ules and st		
Michael	/)		anuary	29,	1998
Signature of Officer			Date		
Michael	Picozzi				
Print or Type Name of	f Officer				

President

Title of Officer

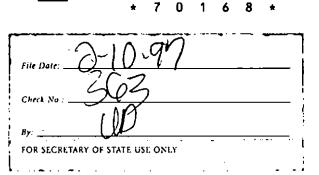


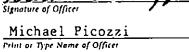
James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-277-3040

PROFIT CORPORATION ANNUAL REPORT 1997

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

(FORM MUST BE TYPED I	IN BLACK)				THIS TORM
1. Corporate ID No. 70168	2. Name of Corpora SWB INDU	STRIES, INC.			
3. Street Address Principal B.	usiness Office	,	City	State	Zip
1000 Knotty	Oak Road		Норе	RI	0283.1=0299
4. Business Phone No.		S. State of Incorporation	•		6. SIC Code
(401) 822-25	00	RHODE ISLAN	U		0075
	haracter of Business Conducted I				
Operating a	trucking and con	struction company	and any other la	wful business.	
8. NAMES AND ADI	DRESSES OF THE OFF	CERS ("X" BOX FOR ATTAC	IMENT)		
President Name			Vice President Name		
Michael_Pico	zz.i		Shane_WBette	2	
Street Address			Street Address		
1.000Knot t.y	.Oak_Road		il000_Knotty_0a	k-Road	
City	State	Zip	:)	Zip
Норе	RI	02831-0299	Hope	RI	02831-0299
Sceretary Name			Treasurer Name		
Shane W. Bet	tez		Michael Picozz	i	
Street Address 1000 Knotty	Oak Road		Street Address 1000 Knotty Oa	k Road	
City	State	Zip	City	State	Zip
Норе	i RI	: 02831-0299	Норе	RI	02831-0299
9. NAMES AND ADI	DRESSES OF THE DIR	ECTORS (*X* BOX FOR ATT)	ACHMENT)		
Olrector Name			Director Name		
Michael Pico	zzi	•			
Street Address			Street Address		
1000 Knotty	Oak Road				
City	State	Zip	City	State	ZIp
Hope	RI	02831-0299			
Director Name	*************************		Director Name		
Street Address			Street Address		
			<u>:</u>		
City	State	Zip	City	State	l Zip
10. SHARES AUTHO	RIZED AND ISSUED	"X" BOX FOR ATTACHMENT)	0		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Serles	Par Value	Number of Shares	Class/Serles	Par Value
600 SHS COMM	I NO PAR VALUE		NONE	Common	No Par Value
			•		
L			· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	
This report must be	signed in ink by eitl	her the President, Vice	President, Secretary, Ass	istant Secretary, Treasu	rer, Receiver or Truste
		au irai	•	•	•
				•	





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.



Title of Officer

February 7, 1997

PROFIT CORPORATION ANNUAL REPORT

1996



State of Rhode Island and Providence Plantations James R. Langevin, Secretary of State Corporations Division 100 Nonth Main Street

Providence, Rhode Island 02903-1335 • (401) 277-3040

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

SECRETARY NAME		υī
Shane W. Bettez	<u> </u>	
1000 Knotty Oak		ď
Норе	STATE	RI
DIRECTOR NAME		9. NA
Michael Picozzi		
1000 Knotty Oak		d
ат Норе	STATE	RI
DIRECTOR NAME		-
STREET ADOMESS		
an	STATE	
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		10.5
	UTHORIZ	
		1 0 . S ED SHARES /SERES
	CLASS	ED SHARES / SERIES
MUMBER OF SHARES	CLASS	ED SHARES / SERIES
MUMBER OF SHARES	CLASS	ED SHARES / SERIES

For Secretary of State Use Only

Check No:

By: .

PORATE ID NO	2. NAME OF CORPORATION	PLEASE TYPE OR PF	RINT IN BLACK INK.		·
70168	SWB I	NDUSTRIES, INC.			ı
EET ADDRESS PREVORUTEUS			div	STATE	2/P COORE
1000 Knott	y Oak Road 	5. STATE OF INCORPORATION	Норе	RI	. 02831-0299
(401) 822-	2500	RHODE ISLA	AND		0075 & 3889
DESCRIPTION OF THE CHARAC	TER OF BUSINESS CONDUCTED IN TRACOCT	EAR5			00/3 d 3003
Operating a	a trucking and co	onstruction compa	any and any other	lawful busine	ss.
NT NAME			SSES OF THE OF		
Michael Pi	Cozzi		McErmesuburlume Shane W. Bet	±0.7	
LODAESS		·	STREET ADDRESS		
1000 Knotty	y Oak Road	T2/P C000€	1000 Knotty		
Норе	RI	02831-0299	Hope	STATE	02831-0299
RY NAME			THEASUREH NAME		1 05001-0598
Shane W. Be	errez		Michael Pico:	zzi	
1000 Knotty			1000 KNotty (Dak Road	
Наре	STATE	72₽ 000€	any	STATE	ZIP CODE
		I S AND ADDRE	Hope	RECTORS	02831-0299
RNAME Dia			DIRECTOR HAME		· · · · · · · · · · · · · · · · · · ·
Michael Pic	UZZ1		STREET ADDRESS		
1000 Knotty	Oak Road				
Норе	STATE RI	12P 0008	an -	STATE	ZIP C00E
RHAME		02831-0299	DIRECTOR HAME		
03NESS					
nove 22		· ·	STREET ADDRESS		
	STATE	ZIP COOE	άπν	STATE	2P C 00€
			<u> </u>		
		ARES AUTHORIZ	ED AND ISSUED		
MUMBER OF SHARES	AUTHORIZED SHARES CLASS/SERIES	PAR VALUE	MUMBER OF SHARES	ISSUED SHARES CLASS / SERIES	PAR VALUE
600 SHS COM	M NO PAR VALUE		None	Common	
	THE THE PROPERTY OF		110110	Common	NO PAR VALUE
			ļ		
. 			· · · · · · · · · · · · · · · · · · ·	<u> </u>	<u> </u>
Р	his resident, Vice Presidei	report must be SIGNI nt, Secretarv. Assistan	ED IN INK by either the at Secretary, Treasurer,	e Receiver or Truste	s ====
			under penalty of report, including a	any accompanying schi	affirm that I have examine edules and statements, ar
			all statements	stained have a t-	and an each
	1/15/96		all statements co	ntained herein are true	and correct.

Michael Picozzi Print or Type Name of Officer

President March 20, 1996

Title of Officer Date

State of Rhode Island and Providence Plantations Office of The Secretary of State 100 North Main Street

100 North Main Street Providence, Rhode Island 02903-1335 401-277-3040

ANNUAL REPORT

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Make Checks Payable to: Secretary of State

ALL ENTRIES MUST BE COMPLETED IN FULL OR THE FORM WILL BE RETURNED. 0070168

0070168 Corporate ID:			Annual Report for the year:		
	SWB INDUSTRIES,		idai Keport Ioi	the year.	
Name of Corporation: Business entity organized under the laws of the State of: Rhode Island For foreign entity, address and telephone number of principal office: N/A			Business Entity is (check one): [X] Business Corporation (See RIGL Chapter 7-1.1) [] Professional Service Corporation (See RIGL Chapter 7-5.1)		
Phone: () Address and telephone of the Island (Provide street address1000_Knotty_0akHope,_RI_02831	principal office of business entity in Rho - Not P.O. Box): .Road	xle	_Operatin	of the character of business conduc g_a_trucking_and_cons and_any_other_lawful	tructionbusiness
Phone: (401)822=25	00				
	THE NAM	IES OF THE ()FFICERS AI	RE:	
Michael Picozzi	1000	STREET ADDRESS Knotty Oa		CHYSTAIE Coventry, RI	ZIP CODE 02816
VICEPRESIDENT		STREET ADDRESS	K KOAU	CHYSTATE	702010
Shane W. Bettez		Knotty Oal	k Ro <u>ad</u>	Coventry, RI	02816
Shane W. Bettez	1000	Knotty Oal	k Road	Coventry, RI	02816 ZP CODE
Michael Picozzi		Knotty Oal		Coventry, RI	02816
NAME	THE NAM	ES OF THE DESTREET ADDRESS	IRECTORS A	RE:	ZIP CODE
Michael Picozzi	10 <u>00</u>	Knotty Oal	k Road	Coventry, RI	02816 zir cob.
Shane W. Bettez	1000	Knotty Oal	k Road	Coventry, R1	02816 zie cobe
NUMBER OF SHARES AUTH	ORIZED (Rider may be attached)			ES ISSUED AND OUTSTANDING (F	lider may be attached)
Number of Shares	Class / Series	Nu	mber of Shares	Class / Series	
600	Common, no par valu	е (600	Common, no par	r value
Date		By: Llu	hup E	Ingy Ner Michael Picozzi	· · ———
Form 21 1.75			ME OF OFFICER SIGN	::	
Form 31 1.95	DESIGNATED REGISTI	TITUTOFORICER RED AGENT		TE OF PROCESS:	
PLEASE NOTE: If the regist	ered office and/or registered agent indi			•••	

PAUL J. PISANO 681 SMITH STREET PROVIDENCE RI 02908 JUN 19 1995 SECRET RY OF STATE Filing Fee \$50 00 Payable to Secretary of State

PLEASE TYPE or PRINT

File Annually LLC Sept. (+ Nov. 1 CORP, Jan. 1 - March

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

Corporate ID:		Annual Report for	the year 1994	
Name of Business Entit	ıy	SWE INDUS	TRIE5, INC	
Business entity organized c	ander the laws of the State of Rhode 1s1			
Federal Taxpayer Identifica			siness Corporation (See RIGL Chapter dessional Service Corporation (See RI	
	and telephone number of principal office		nited Liability Company (Sec RIGL 7-	
	N/A	communication	mailing address of contact person to was may be directed Picozzi, President	(jan)
<u> </u>		_ P.O <u>. Bo</u>	<u> </u>	
Phone: (i		· · · · _	<u> </u>	
 Address and telephone of the Island (Provide street), dure 	ne principal office of business entity in Rhodi ss : Not P.O. Box;		·	
	tty Oak Road		of the character of business conducted ng a trucking and const	
Ho <u>pe,</u> RI	02831	·	and any other lawful bu	
		Date of Organiz	vation <u>November 4, 199</u> 2	·
Phone <u>4.40</u> 1 + <u>822</u> -	-2 <u>500</u>	Date of Qualific	cation to do business in Rhode Island (i 	if foreign entity)
·	THE NAME	S OF THE OFFICERS A	RE:	
Michael Picozzi	1000 Knot	ty Oak Road	Coventry, RI	- — — — — — — — — — — — — — — — — — — —
Shane W. Bettez ∐ (IS:00:3Norskoksok	K SIGSITAS COLANDA	ty Qak Road.	Coventry, RI	
Shane W. Bettez	1000 Knot	Ly Oak Road	Coventry, RI	02816
Michael Picozzi	1000 Knot	ty Oak Road	Coventry, RI	02816
NAN::	TH <u>E NA</u> MES	S OF THE DIRECTORS A	RE:	
Michael Picozzi	_	ty Oak Road	Coventry, RI	02816 Ziir Crape
Shane W. Bettez	1000 Knot	ty Oak Road	Coventry, RI	02816 /200.
NUMBER OF SHARES A	UTHORIZED (If Applicable)	NUMBER OF SHA	RES ISSUED AND OUTSTANDING	— Fiff Applicable)
NUMBER	600	NUMBER	600	
CLASS	Common	CLASS	Common	
SERIES		SERIES		
PAR VALUE OR WITHOUT PAR	No par value	PAR VALUE OR j WITHOUT PAR	No par value	
Date		By Michael	lugge_	
FIL	ED	Michael Picozzi, .	<u>y</u>	
MAR 2	8 1994	President		
FO-11 1 100 By CC	216	TOTES OF ORTHOPING SPENING	·	
	DESIGNATED REGISTERED OR I	RESIDENT AGENT FOR	SERVICE OF PROCESS:	
	poration has changed its registered office a			 .

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
ROVIDENCE, RHODE ISLAND 02903

	<i>i</i> .	ŕ	١
1	U	-	′

Corporate ID 70168	PROVIDENCE, RH	ODE ISLAND 02903 Annual Report for the	vear 1993
First: The name of th	e corporation is	NDUSTRIES, INC.	
SECOND: It is incorpor	ated under the laws of	Rhode Island	
THIRD: Character of b	usiness, briefly stated, is	Operating a trucking and	construction company.
and any other lawful	business		
FOURTH: If foreign con	rporation, address of its pro	incipal office	
FIFTH: Business address			
Sixth: Names and add	dresses of its directors and	Officers: Address (including our	(Attach rider if necessary) aber, street, zip coder
Michael Picozzi	Director	506 Hope Furnace Rd.,	Hope, RI 02831
Shane W. Bettez	Director	178 Trout Brook Lane,	Hope, RI 02831
	Director		
Michael Picozzi	President	506 Hope Furnace Rd.,	Hope, RI 02831
C' II D	Vice Preside	nt 178 Triut Brook Lane,	Hope, RI 02831
Michael Picozzi	Secretary	506 Hope Furnace Rd.,	Hope, RI 02831
Shane W. Bettez	Treasurer	178 Trout Brook Lane,	Hope, RI 02831
SEVENTH: Number of	Shares authorized:		Par Value
No. of Shares	Class	Series	shares are without par value
600	Common	FFAAAA	No par value
EIGHTH: Number of S	hares issued:	SECY OF SERVATE	Par Value or statement that shares are without
No. of Shares	Class	Schild XIE	par value
	Common		No par value
Dated		SWB INDUSTRIES, INC.	
		y Mufael are	zzi

(Report must be signed by an officer)

WAIVER OF NOTICE

JOINT STOCKHOLDERS AND DIRECTORS MEETING (1993)

SWB INDUSTRIES, INC.

We, the undersigned, being all of the Stockholders and Directors, hereby consent and agree that the annual meeting of said Stockholders and Directors shall be held at the offices of PAUL J. PISANO LAW ASSOCIATES, 681 Smith Street, Providence, RI at 10:00 a.m., on January 13, 1993.

We hereby waive all other and further notice of said meeting pursuant to the General Laws of Rhode Island, as amended.

Michael Picozzi

Shane W. Bettez