

* 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

Form 630 12/01

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

Filing Period: January 1		iling Fee: \$50.00		· · · · · · · · · · · · · · · · · · ·	_	
(FORM MUST BE TYPED IN I		ang mang mang mengang			a (1848 aa) oo o	
1. Corporate ID No. 86785	2. Name of Corpor Northeast Co	ration onsulting Engineers, I	nc.			
3. Street Address Principal Busin			City	State	7.m	
74 HOLDEN STREET	The state of the s		DANVERS	MA	<i>Zip</i> : 01923 −	
4. Business Phone No.	***	, 5. State of Incorporati			6. SIC Code	
9787778339		MASSACHUSE			7518	
7. Brief Description of the Chard TO ENGAGE IN THE PR	ncter of Business Cond ACTICE OF AND	ducted in Rhode Island TO PROVIDE ENGINE	BERING SERVICES.			
8. NAMES AND ADDRESS President Name	ses of the off	ICERS ('X" BOX FOR A	ITACHMENT) FILL IN SPACE Vice President Name	S BEPORE USING ATTAC	HMENTS	
John W. Mroszczyk			None			
Street Address			Street Address	- was was a second		
7 Day Avenue			•			
City	State	Zıp	City	State	Zip	
Danvers	MA	01923				
Secretary Name			Treasurer Name			
John W. Mroszczyk			John W. Mroszczyk		:	
Street Address			Street Address	***************************************	······································	
7 Day Avenue			7 Day Avenue			
City	State	Zıp	City	State	Zip	
Danvers	MA	01923	Danvers	MA	01923	
9. NAMES AND ADDRESS Director Name	es of the dire	SCTOR\$ ("X" BOX FOR	ATTACHMENT) TILL IN SPAC Director Name	ës before using atta	CHMENTS	
John W. Mroszczyk			Jean M. Mroszczyk			
Street Address	*************	******** **	Street Address			
same as above			same as above			
City	State	Zıp	City	State	21р	
Director Name		*** * * * * * * * * * * * * * * * * * *	Director Name	· · · · · · · · · · · · · · · · · · ·		
Street Address	Anti-control of wear		Street Address	a		
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Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value	
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i nis report must de signe d	in ink by either	the President, Vice Pi	resident, Secretary, Assistant	Secretary, Treasurer, .	Receiver or Trustee	
81 18118 81111 14861	IB(B) \$)					
	iriai b ii					
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6 6 7 7	, ,		Under penalty of perjury, I			
		\neg	this report, including any a and that all statements con			
86785 FBC 02/05/05 0	1:25:22 PM		and that all statements con	anneo nerem are mue ano	correct.	
File Date -UED			MANIAN MA	men 2/	11.	
HIPP	1.05	1	Signature of Officer	Dob	~//C-> -	
Check No. 9 9 2 701	3 4.75		John W. Mrosz	czyk	,	
LED BOT	<u></u>	1	Print or Type Name of Officer			
$B_{\underline{V}}$:	<u>15</u>	_				
FOR SERVICE UNITALE U	ISE ONLY	1	President			
		1	Tule of Officer		11. (20.12/01	



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

Matthew A. Brown, Secretary of State Corporations Division 160 North Main Street, Providence, RI 02903-1335 461.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

Filing Period: January 1 -	March 1 •	Filing Fee: \$50.00		· · · · · · · · · · · · · · · · · · ·	
(FORM MUST BE TYPED IN E 1. Corporate ID No	2. Name of Corp			·	
86785	Northeast (Consulting Engineers,	Inc.		
3. Street Address Principal Busii	ness Office		City	State	Zıp
74 HOLDEN STREET			DANVERS	MA	01923-
4. Business Phone No.		5. State of Incorpora	tion		6. SIC Code
, 9787778339		MASSACHUS	ETTS		7518
7. Brief Description of the Chard TO ENGAGE IN THE PR			NEERING SERVICES.		
8: NAMES AND ADDRES	SES OF THE O	FICERS CX" BOX FOR	ATTACHMENT) [] FILL IN SPA	CES BEFORE USING A	TTACHMENTS
John W. Mroszczyk			None		
Street Address			Street Address		
7 Day Avenue					
Cin.	State	$Z \phi$	City	State	Zip
Danvers	MA	01923			•
Secretary Name	•		Treasurer Name	•	
John W. Mroszczyk			John W. Mroszczy	⁄k	
Street Address		•	Street Address	•	
7 Day Avenue			.7 Day Avenue		
City	State	Zip	City	State	Zip
Danvers	MA.	01923	Danvers	MA	01923
9. NAMES AND ADDRESS Director Name	SES OF THE DI	RECTORS C'X" BOX FO	RATTACHMENT FILE IN SI	PACES BEFORE USING	ATTACHMENTS
John W. Mroszczyk			'Jean M. Mroszczy	/k	
Street Address			Street Address		
same as above			same as above		•
City	State	7.5		State	[Zip]
Chy	state	Z _' p	City	ome	.μφ
Director Name	•	•	Director Name		
Street Address			Street Address		
City	State	Zi p	City	State	Zip
10. SHARES AUTHORIZI	D avenor so	DATESCHIALENTS []	IL SHARES ISSUED ("A"	PAY VAN ATTACULE	was CT
AUTHORIZED SHARES	SIFE NOW FOR	KALIAGINIERI) 🔟 🔠	ISSUED SHARES	DON-FORCES INCHIBITES	™ Light math in the teacher
Number of Shares	Class/Series	Par Value	Number of Shores	ClassNeries	Par Vulue
			• • •		• •
15,000 COMM NO PAR	VALUE		1,000	Common	No Par
					·
This report must be <mark>signe</mark>	d in ink by eat	her the President, Vice	President, Secretary, Assist	ant Secretary, Treas	urer, Receiver or Trustee
01 10110 12111 1000	1618 B				
			11 1		that I have assuming
8 0 7	8 >			ury, I declare and affirm	
	***			any accompanying sche s contained herein are tr	
86785 FBC 02/18/04 (02:14:28:PM		and that all statements	A A	ne and correct
File Date 2 2410	d		()MANIS	1 2000 m	~ 2/20/04
		_	Swhallere of Officer	~1~(57)"	Date
Check No. 5787	on the second			10707Vb	•
	,	-	John W. Mrc		
$ _{\mathcal{B}_{V_{-}}}$. $\mathcal{V}_{S_{+}}$			Frint or Type Name of O	njicer	
			President		
FOR SECRETARY OF STATE	USE ONLY	1	Title of Officer		Form 630 (20)

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

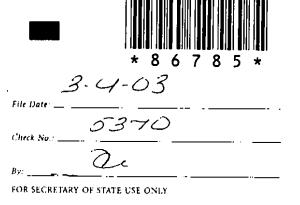
PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR _ 2003

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



IFORM MUST BE T	אין OR משדני	NTED IN BLACK)				
1. Corporate ID No		2. Name of Corpora				
86785			Consulting Engineers, I	nc.		
3. Street Address Pr	•	••		City	State	Zip
74 H 4. Business Phone?		Street	5. State of Incorporation	Danvers	MA	01923 6. SIC Code
) 777- of the Charac		MASSACHUS	SETTS ering service in	naludina donia	7518
8. NAMES AN President Name	accio D ADDRI	SSES OF THE OFF	igation, expe	rt witness, general ACHMENT) FILL IN SPACES Vice President Name	eral consultat	ion and related
Street Address		coszczyk		None Street Address		
	y Aver		_			
City		State	Zip	City	State	Zip
Danv Secretary Name	ers	MA	01923	Treasurer Name		
John Street Address	W. Mr	roszczyk		John W. Mrc Street Address	oszczyk	·
	as ab	ove		same as abo	ove	
City		State	Zip	City	State	Zip
9: NAMES AN Director Name	D ADDRE	SSES OF THE DIRI	ECTORS ("X" BOX FOR A	TTACHMENT) FILL IN SPAC	ES BEFORE USING ATTA	CHMENTS
*Street Address	hn W.	Mroszczyk		Jean M. Mrc	oszczyk	
same	as ab	ove		same as abo	ove	
City		State	Zip	City	State	Zip
Director Name				Director Name		
An	gela F	R. Mroszczyk		Street Address		
	as ab	OVO		SHEEL MARKETS		
City	as ar	State	Zıp	City	State	Zip
10. SHARES AU AUDHORIZED SHARES	U THORIZ	ED ("X" BOX FOR ATTA	aCHMENT)	11. SHARES ISSUED (ISSUED SHARES	"X" BOX FOR ATTACHMENT)	
Number of Shares		Class/Series	Par Value	Number of Shares	Class/Series	Par Value
15,000 COMN	I NO PAR Y	/ALUE		1,000	Common	No Par

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

John W. Mroszczyk

	-
·	
Print or Type Name of Officer	
The state of the s	

President Title of Officer

5

Ferm 639 12102



(FORM MUST BE TYPED IN BLACK)

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

STOP PLEASE READ INSTRUCTIONS

1. Corporal	e ID No	2. Name of Corpo	ration	•		
867		Northeast 0	onsulting Engineers, Inc			
3. Stiret Ac	fdress Principal I	Iusiness Office	JJ	 Cap	State	/ n
	74 Hold	len Street		Danvers	MA	01923
4 Business	Phone No		5 State of Incorporation			6 SIC Gode
		77-8339	MASSACHUSE	TTS		7519
7 Brief Des	cription of the C	haracter of Business Conducted	in Rhode Island Engine	eering service	inalwaina a.	7510
	ES AND AD					sign, safety, ation and related FACHMENTS services.
	John W.	Mroszczyk		None		
Street Addre				Street Address		
	7 Day A	venue				
City		State	Zip	City	State	Zip
	Danvers	MA	01923			2.4
Secretary No	me		•	Treasurer Name		
	John W.	Mroszczyk		John W. Mrd	oszczyk	
Street Addre	ss	-		Street Address		
	same as	above		same as abo	ove	
City		State	Zip	City	State	Zip
9. NAME	S AND ADI	DRESSES OF THE DIR	ECTORS ("X" BOX FOR A	TACHMENT) FILL IN SPAC	CES BEFORE USING A	TTACHMENTS
Street Addres		Mroszczyk		Jean M. Mrc	oszczyk	
	same as	above		same as abo	ove	
City		State	Zip	City	State	Zip
Director Nan	ne			Director Name		
Street Addres		R. Mroszczyk		Street Address		
!	same as	above				
City		State	Zip	City	State	Zip
10. SHAR	ES AUTHOR	RIZED ("X" BOX FOR ATT	ACHMENT)	11. SHARES ISSUED	(*X* BOX FOR ATTACHMI	(NT)

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

ISSUED SHARES

Number of Shares

1,000



Class/Series

Par Value

AUTHORIZED SHARES

15,000 COMM NO PAR VALUE

FOR SECRETARY OF STATE USE ONLY

Number of Shares

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.

Class/Series

Common

Par Value

No Par

Signature of Officer

John W. Mroszczyk

John W. Mroszczyk

Print or Type Name of Officer

President

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. 86785 Consulting Engineers, Inc. 3. Street Address Principal Business Office 74 Holden Street Danvers MA 01923 4. Business Phone No. $(978) \cdot 777 - 8339$ 7 Brief Description of the Character of Business Conducted in Rhode Island Engineering serv. including design, safety, forensic, accident investigation, expert witneww, general consultation and related services. 8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS President Name Vice President Name John W. Mroszczyk None Street Address Street Address 7 Day Avenue City State Z_{1p} City State ZipDanvers MA 01923 Secretary Name Treasurer Name Street Address Street Address John W. Mroszozyk John W. Mroszczyk State Zip State Lip same as above same as above 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Director Name Director Name John W. Mroszczyk Jean M. Mroszczyk Street Address same as above same as above City State State Zip Director Name Director Name Angela R. Mroszczyk Street Address Street Address 7 Day Avenue City State City State Zip Danvers RT 01912 10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) AUTHORIZED SHARES ESSUED SHARES Number of Shares Class/Series Par Value Number of Shares Class/Series Par Value 15,000 COMM NO PAR VALUE

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



File Date

Check No.

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.

Common

No Par

John W. Mroszczyk

Print or Type Name of Officer

President

1,000



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

STOP PUANT SEAD
INSTRUCTIONS

(FORM MUST BE TYPFD IN BLACK)

Angela R. Mros	szczyk	
7 Day Avenue	State	Zip
Danvers 10. SHARES AUTHORIZ	MA ZED (*x* box for at	TACHMENT.
AUTHORIZED SHARES Number of Shares	Class/Series	Par
15,000 COMM NO	PAR VALUE	
This report must be significant	gned in ink by eit	her the I
	8 6 7 8 5	*
File Date:	4/12/00	
Check No	4139	
Ву:	1(10	
FOR SECRETARY OF STATE US	SE ONLY	

1. Corporate ID No.	2. Name of Corporat	ion			
86785	Northeast	Consulting Engin	eers, Inc. **TO D	OBUSINESS UNDE	R FICTITIO
3. Street Address Principal Business Off	fice		City	State	Zip
74 Holten Street		5. State of Incorporation	Danvers	MA	6.9.1.9.2.3
(978) 777-8339		MASSACHUSETT	S		7518
7. Brief Description of the Character of	Business Conducted in	Rhode Island Enginee:	ring serv. incl	luding design	,safety, forensi
accident investi	gation e S OF THE OFFIC	xpert witness, E CERS ("X" BOX FOR ATTACH	reneral consult	ation and re	lated services
President Name	1		Vice President Name		
John W. Mroszczy Street Address	K		None Street Address		
7 Day Avenue			Street Address		
City	State	Zip	City	State	Zip
Danvers	MA	01923	•,		-,1
Secretary Name		01)23	Treasurer Name		
John W. Mroszczy	k		John W. Mros	szczyk	
Street Address	•		Street Address	· ·	
same as above			same as abov	<i>r</i> e	
City	State	Ztp	City	State	Zip
9. NAMES AND ADDRESSE Director Name John W. Mroszczy		CTORS ("X" BOX FOR ATTAI	Director Name	S BEFORE USING ATT	ACHMENTS
John W. Mroszczy Street Address	ĸ		Jean M.Mrosz	гслук	
same as above			same as abov		
City	State	Zip	City	State	Zlp
Director Name Angela R. Mroszc	zvk		Director Name		
Street Address	- J		Street Address		
7 Don Amorus				Face + 1	
7 Day Avenue	State	Zip	City	State	Zip
Danvers 10. SHARES AUTHORIZED AUTHORIZED SHARES	MA (*x* box for atta	01923 CHMENT)	11. SHARES ISSUED (* ISSUED SHARES	X BOX FOR ATTACHMEN	T)
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Far Value
15,000 COMM NO PAR	R VALUE		1,000	Common	No Par

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.
Signatury of Officer Dute
John Mroszczyk Print or Type Name of Officer
 President



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

1999

PROFIT CORPORATION	ANNUAL	REPORT	FOR	THE	YEAR	•
Filing Period: January 1-March 1 •	Filing Fee: \$50	0.00				

(FORM MUST BE TYPED IN B	LACK				\	
1. Carpurate ID No. 86785	2. Name of Corpo Northeas		rs, Inc. **TO DOBUSINE	SS UNDER FICTIT	IOUS NAME O	<u>,,,</u>
3. Street Address Principal Busine	ess Office		City	State	ZIp	
74 Holten Sti 4. Business Phone No.	reet	5. State of Incorporation		MA	0192] 6. SIC Code	3
(508) 777-8 7. Brief Description of the Charac	ter of Business Conducted	MASSACHU I in Rhode Island			7518	
8. NAMES AND ADDRE	tigation, exp	ert witness, gen FICERS (*X* BOX FOR ATT)	ering services incleral consultation (CHMENT) FILLIN SPACES	luding design and related se BEFORE USING ATTA		ensic,
President Name			. Vice President Name			•
John W. Mroszcz Street Address	zyk		NONE Street Address		·	•
7 Day Avenue	_		•			
Cuy Danvers	State MA	^{Ζ(ρ} 01923	City	State	Zip	٠.
Secretary Name		• **	Treasurer Name			• •
John W. Mroszca	ıyk		John W. Mroszo	czyk		
same as above			same as above			
City	State	Zip	City	State	Zip	•
9. NAMES AND ADDRE	SSES OF THE DIR	ECTORS ("X" BOX FOR A	TACHMENT) FILL IN SPACE	ES BEFORE USING AT	TACHMENTS	
John W. Mroszcz Street Address same as above	yk		Jean M. Mroszcz Street Address	zyk		
City	State	Zip	same as above	State	Zip	-
Director Name	•	•	Director Name	• • • • • • • • • • • • • • • • • • • •	· •··•• '··· ••••·· ·	
Angela R. Mrosz	czyk					
Street Address			Street Address		•	-
7 Day Avenue	State	Zip	Clty		<u>.</u>	_
Danvers	MA	01923	GII.)	State	ZIp	
IO. SHARES AUTHORIZE NUTHORIZZED SHARES	ED ("X" BOX FOR ATT		11. SHARES ISSUED (*	X" BOX FOR ATTACHMEN	T) (-
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value	-
15,000 COMM NO P	AR VALUE					
			1,000	Common	No Par	•

	* 8 6 7 8 5 *
File Date:	Mar 11,99
Check No.:	3698
By:	OF STATE USE ONLY

Under penalty of perfury, I dect	are and affi	Irm that I have examined
this report, including any accor	npanying se	chedules and statements, and
that all statements contained he		
Jummy	22	3/1/99
Signatureldf Officer		Dale

John W. Mroszczyk 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 CORPORATION ANNUAL REPORT FOR THE YEAR 1998 Filing Period: January 1-March 1 • Filing Fee: \$50.00



(FORM MUST BE TYPED IN BL	ACK)				
1. Corporate ID No.	2. Name of Corpora				<u></u>
86785	Northeast	Consulting Eng	ineers, Inc.		
3. Street Address Principal Business	Office		City	State	Zip
74 Holten St.			Danvers	MA	01923
4. Business Phone No.		5. State of Incorporation			6. SIC Code
(508) 777-8339		Massachus			7518
 Brief Description of the Characte accident invest 	r of Business Conducted Cigation, exp	in Rhode Island Enginee: ert witness, gel	ring services incluneral consultation	iding design, sa and related ser	afety, forensic, rvices.
8. NAMES AND ADDRES					•
President Name	1.		Vice President Name		
John W. Mroszcz	сук		None		
Street Address 7 Day Ave.			Street Address		
City Danvers	State MA	zip 01923	City	State	Zip
Secretary Name			Treasurer Name	**	
John W. Mroszcz	yk		John W. Mros	szczyk	
same as above			same as abov	'a	
City	State	Zip	City	State	Zip
9. NAMES AND ADDRES Director Name John W. Mroszcz			Director Name Jean M. Mros	zczyk	
Street Address Same as above	- ,		Street Address 7 Day Ave.		
City	State	ZIp	City	State	Zip
			Danvers	MA	01923
Director Name		•	Director Name	•• • •••	
Angela R. Mrosz	czyk				
Street Address	-		Street Address		
7 Day Ave.					
Sity	State	ZIp	City	State	Zip
Danvers	MA	01923			
IO. SHARES AUTHORIZE:	D (*X* BOX FOR ATT)	ACHMENT)	11. SHARES ISSUED (ISSUED SHARES	"X" BOX FOR ATTACHMEN	T) .
Yumber of Shares 3	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
15,000	Common	no par	1,000	Common	no par
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Marie &					
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Sile Des	3/19	
File Date:		
Check No.:	4462	
By:	(ID	
FOR SECRETARY OF S	TATE 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

John W. Mroszczyk 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 CORPORATION ANNUAL REPORT 1997

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 2. Name of Corporation 86785 Northeast Consulting Engineers. Inc.** TO DOBUSINESS UNDER FICTITOUS NAME

Zip

01923

3.	Street A	ddress Princ	ipal	Business	Office
		Holte			

Danvers

MA

01923

4. Business Phone No. (508) 777-8339

5. State of Incorporation **MASSACHUSETTS**

6. SIC Code 7518

safety, forensic, accident investigation, expert witness es.

_	,	Penerar	COHSUL	ration (anu	related	servic
3.	NAMES AND	ADDRESSES	S OF THE	OFFICER	S ("X"	BOX FOR ATT	TACHMENT)
					•		MOI IN ENTLY

President Name John W. Mroszczyk

Street Address

7 Day Ave.

Danvers

Secretary Name

John W. Mroszczyk

Street Address

same as above City

State

State

MA

Vice President Name

None

City

Street Address

Treasurer Name

John W. Mroszczýk

Street Address

same as above

City

State

State

Zip

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

Director Name

John w. Mroszczyk

Street Address

7 Day Ave.

Danvers

Director Name

Street Address

State MA Zip 01923

Jean M. Mroszczyk Street Address

7 Day Ave.

City Danvers

Director Name

State MΑ

Zip 01923

Director Name

Street Address

7 Day Ave.

Angela R. Mroszczyk

City Danvers

State MA 7.ip 01923

City

State

Zip

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

AUTHORIZED SHARES

Number of Shares Class/Series

15,000 SHS COMM NO PAR VA

Par Value

USSUTED SHARES

Number of Shares

Class/Series

Par Value

1,000

Common

no par

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



Check No.:

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.

<u>John w. Mroszczyk</u> Print or Type Name of Officer

President

PROFIT CORPORATION ANNUAL REPORT

1996



John W. Mroszczyk

Print or Type Name of Officer

President Title of Officer 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

Check No:

By:

		O PAGE TUDE O				
1. CORPORATE ID NO.	2. NAME OF CORPORA	PLEASE TYPE OR PRINT IN BLACK INK.				
· 86785	Nor	theast Consulting	Fraireara I	mo no d/h/o	NCE Inc	
3. STREÉT ADORESS PRINCIPAL BUSINE	SS OFFICE		Engineers. Inc.**	TO DO U/D/A	NUE, INC.	
74 Holten St.			Danvers	: MA	01923	
BUSINESS PHONE NO.		5. STATE OF INCORPORATION			6.SCC00E	
(508) 777-8339		MASSACH	IUSETTS		7518/7286	
BRIEF DESCRIPTION OF THE CHARACTI	ER OF BUSINESS CONDUCTED IN R	HOOSE ISLAND				
Engineering Se	rvices, inclu	ding design, safe	ety, forensic, acci	dent investiga	ation, expert	
Wiriness, Seueric	ar_consuicati	on and related se	RESSES OF THE O	ELICEBE		
ESIDENT NAME	- -		VICE PRESIDENT NAME		*	
John W. Mroszcz	zyk		None			
REET ADORESS			STREET ADDRESS			
7 Day Ave.	STATE					
" Danvers	MA	200k	ату	STATE	ZIP C000£	
CRETARY HAVE	I CIA	01923	TREASURER HAME			
John W. Mroszcz	zyk		John W. Mroszcz	yk		
REET ADORESS			STREET ADDRESS	-		
same as above	STATE	I ZIP COOE	same as above			
1	SIRIE	ZP COOE	ary	STATE	ZIP CODE	
	9. 1	MAMES AND ADDI	RESSES OF THE DI	RECTORS		
RECTOR HAKE			DIRECTOR NAME			
John W. Mroszcz	.yk		Jean M. Mroszcz	yk		
REET ADORESS			STREET ADORESS			
7 Day Ave.	STATE	72P CODE	.7 Day Ave.			
Danvers	MA	01923	Danvers	STATE	2P CODE	
ECTOR NAME		[01)25	DRECTOR NAME	INA	01923	
Angela R. Mrosz	czyk					
REET ADDRESS			STREET ADDRESS			
7 Day Ave.	STATE	1 to energy	4			
Danvers	MA	20 000€ 01923	arv	STATE	ZIP CODE	
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<u> </u>	1 0 .		IIZED AND ISSUED	· · · · · · · · · · · · · · · · · · ·		
MUMBER OF SHARES	AUTHORIZED SHARES CLASS / SERIES	PAR VALUE	MUVSER OF SHARES	ISSUED SHARES CLASS/SERIES	PAR VALUE	
		···		COSS / SENES	NAME AND THE STREET	
15,000 SHS	S COMM NO PAR	VA .	1,000	Com	no par val	
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			4	Ţ		
Pr	esident, Vice Pres	This report must be SI (sident, Secretary, Assis	report, including	, Receiver or Trusto of periury, I declare and	affirm that I have examined the	
-		•			and correct.	
File Date: 3-	22-96			VVVVVV		
i iio Date.	70		Signature of Offi	cer		