



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

Corporations Division
100 North Main Str.
Providence, RI 02903-13
401.222.30

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. 137593		2. Name of Corporation ON-SITE ENGINEERING, INC.			
3. Street Address Principal Business Office 22 Sherwood Dr.		City Westerly		State RI	Zip 02891
4. Business Phone No. 401-348-6831		5. State of Incorporation RHODE ISLAND			6. SIC Code
7. Brief Description of the Character of Business Conducted in Rhode Island PROVIDE PROFESSIONAL CIVIL ENGINEERING SERVICES					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Anthony A. Nenna			Vice President Name		
Street Address 22 Sherwood Dr.			Street Address		
City Westerly	State RI	Zip 02891	City	State	Zip
Secretary Name			Treasurer Name Anthony A. Nenna		
Street Address			Street Address 22 Sherwood Dr.		
City	State	Zip	City Westerly	State RI	Zip 02891
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Anthony A. Nenna			Director Name		
Street Address 22 Sherwood Dr.			Street Address		
City Westerly	State RI	Zip 02891	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
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 NO PAR VALUE			- 0 -		No Par

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



File Date 7-5-05
Check No. 1146
By:
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.

X
Signature of Officer
Anthony Nenna
Print or Type Name of Officer
President
Title of Officer
Date 3/31/05