RI SOS Filing Number: 202212177280 Date: 2/24/2022 4:00:00 PM State of Rhode Island Department of State - Business Services Division Annual Report for the year: 2022 FEB 24 2022 Corporation → Filing period: February 1 - May 1 → Filing Fee: \$50.00 → Penalty: Additional \$25.00 fee if form is not filed by May 31. 1. Entity ID Number 2. Exact name of the Corporation 25998 Worcester Electrical Associates Inc. 3. Principal Office Address City State 10 Pommenville Street Pawtucket 02861 RI 4. NAICS Code 6. Brief description of the character of business conducted in Rhode Island 238210 Electrical Contractor State of Incorporation Massachusetts 7. List ALL officers (names and addresses) Check the box to indicate an attachment President Name Vice-President Name Robert W. Blanchette Street Address Street Address 10 Pommenville Street State City Zip 02861 Pawtucket RI Secretary Name Robert W. Blanchette Treasurer Name Robert W. Blanchette Street Address Street Address 10 Pommenville Street 10 Pommenville Street City State Zip City State Zip Pawtucket RΙ 02861 Pawtucket RΙ 02861 8. List ALL directors (names and addresses) Check the box to indicate an attachment Director Name Director Name Robert H. Blanchette Robert W. Blanchette Street Address Street Address 16713 Golfview Drive 10 Pommenville Street City State Zip State Weston 33326 Pawtucket 02861 FLŔΙ Director Name Director Name Mary M. Blanchette Street Address Street Address 16713 Golfview Drive City State City State Zip Weston FL33326 9. Shares Authorized 10. Shares Issued Check the box to indicate an attachment This information is currently of record in the NUMBER OF SHARES CLASS/SERIES PAR VALUE Department of State. Preferred 2269 100.00 Changes require an additional filing. 12500 Common Without Par 11. This report must be executed on behalf of the corporation by an authorized representative, If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the 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. Name of Authorized Representative Date

I CX Stutt W I

Robert W. Blanchette

Signature of Authorized Representative

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov

MAIL TO:

2/23/22