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

STOP
PLEASE READ INSTRUCTIONS

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No.: 125095
2. Name of Corporation: Breault Roofing, Inc.
3. Street Address Principal Business Office: 110 Madeira Avenue
   City: New Bedford State: MA Zip: 02745
4. Business Phone No.: (508) 995 3047
5. State of Incorporation: MASSACHUSETTS
6. SIC Code: 0430
7. Brief Description of the Character of Business Conducted in Rhode Island: Roofing

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

President Name: James A. Breault	Vice President Name: Alphonse Breault
Street Address: 21 Bertrand Way	Street Address: 1039 Almy St.
City: Acushnet State: MA Zip: 02743	City: New Bedford State: MA Zip: 02745
Secretary Name: Gloria Breault	Treasurer Name: Alphonse Breault
Street Address: 1039 Almy St.	Street Address: 1039 Almy St.
City: New Bedford State: MA Zip: 02745	City: New Bedford State: MA Zip: 02745

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

Director Name: James A. Breault	Director Name: Alphonse Breault
Street Address: 21 Bertrand Way	Street Address: 1039 Almy St.
City: Acushnet State: MA Zip: 02743	City: New Bedford State: MA Zip: 02745
Director Name: Gloria Breault	Director Name:
Street Address: 1039 Almy St.	Street Address:
City: New Bedford State: MA Zip: 02745	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
7,500 COMM NO PAR VALUE			2000	COMM	NO PAR VALUE

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

[redacted] *125095

File Date: 1-31-03

Check No.: 13801

By: Dc

FOR SECRETARY OF STATE USE ONLY

[redacted]

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.

James A Breault 1/28/03
Signature of Officer *Date*

James A. Breault
Print or Type Name of Officer

President
Title of Officer

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Form 630 12/02