



State of Rhode Island  
and Providence Plantations  
Office of the Secretary of State

A. Ralph Mollis, Secretary of State  
Corporations Division  
148 W. River Street  
Providence, RI 02904-2615  
401.222.3040

**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2008**

Filing Period: January 1 - March 1 • Filing Fee: \$50.00\* THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK  
\* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 63862		2. Name of Corporation KIK CUSTOM PRODUCTS, INC.			
3. Street Address Principal Business Office 35 MARTIN STREET			City CUMBERLAND	State RI	Zip 02864
4. Business Phone No. 401-333-4200		5. State of Incorporation TEXAS			
6. Brief Description of the Character of Business Conducted in Rhode Island MANUFACTURE OF PERSONAL CARE AND HOUSEHOLD PRODUCTS					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILE IN SPACES BEFORE USING ATTACHMENTS					
President Name NICHOLAS WHITLEY			Vice President Name		
Street Address 101 MACINTOSH BLVD			Street Address		
City CONCORD	State ON CANADA	Zip L4K 4R5	City	State	Zip
Secretary Name MARK R. HALPERIN			Treasurer Name S. RANDALL SMALLBONE		
Street Address 101 MACINTOSH BLVD			Street Address 101 MACINTOSH BLVD		
City CONCORD	State ON CANADA	Zip L4K 4R5	City CONCORD	State ON CANADA	Zip L4K 4R5
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILE IN SPACES BEFORE USING ATTACHMENTS					
Director Name SCOTT M. CHURBOK			Director Name STRATIS KATIRIS		
Street Address 2921 CORDER ST			Street Address 101 MACINTOSH BLVD		
City HOUSTON	State TX	Zip 77054	City CONCORD	State ON CANADA	Zip L4K 4R5
Director Name JEFFREY M. NODLAND			Director Name		
Street Address 101 MACINTOSH BLVD			Street Address		
City CONCORD	State ON CANADA	Zip L4K 4R5	City	State	Zip
9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1,000	COMMON	\$0.01 PAR VALUE	160	COMMON	\$0.01
			THIS SECTION MUST BE COMPLETED		

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.

FILED \*63862\*

FEB 29 2008

By: [Signature]

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.

[Signature] Date: 08/02/25

S. RANDALL SMALLBONE  
Treasurer