

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 3010

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.  2. Name of Corporation  AAI  TANTERNATIO	us. The
3 Street Address Principal Business Office	City State Zip
1454 MAIN ST	West WARWICK RI 02893
4. Business Phone No. 5. State of Incorporation R. I	
6. Brief Description of the Character of Business Conducted in Rhode Island	
1. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT)   FILL IN SPACES BEFORE USING ATTACHMENTS	
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTA  President Name	CHMENT)   FILL IN SPACES BEFORE USING ATTACHMENTS: Vice President Name
James W Fox	DANIEL P FOX
Street Address	Street Address
33 MARKWOOD DR	City State Zip
KINGSTON RI 02.881	EAST Haddam (T 06423
Shannen E Fox	JAMES W FOX
21 Rock LAND DR	33 PARKWOOD DR
City State Zip	City State Zip
WHACTICLD 12879 8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR AT)	KINSTON RIL 10288/
Director Name  Director Name	
James W tox	DANIEL P FOX
33 PARKWOOD DR	Street Address 9 ORIOLE RL
(31) State   71p   O2 S 8 / O2 S 8 /	State Zip
Director Name	EAST HADDAM CT 06423
Shannen E tox	NANCY-JeAN FOX
Street Address 21 Rock AND DR	GOREVERE ST
City State Zip	Cur State Zip
WAKEFIELD RI 02879	: () HW   W     0 2 0 6
9. SHARES AUTHORIZED	10. SHARES ISSUED ("X" BOX FOR ATTACHMENT)  ISSUED SHARES — THIS SECTION MUST BE COMPLETED
This information is currently of record in the Office of the Secretary of	Number of Shares Class/Series Par Value
State. Changes require an additional filing. See Section 9 of	500 A \$1.00
instruction sheet.	
	ed 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 rep
FILED	including any accompanying schedyles and statements, and that all statem
• FEEL	contained herein are true and correct.
File Date JAN 1 9 2010	Signature Date
Check No.	
1007	Print or Type Name
<i>By</i> :	PROSIDENT
FOR SECRETARY OF STATE USE ONLY	Title
	Form 630 Rev. 08/08