

FOR SECRETARY OF STATE USE ONLY

A. Ralph Mollis, Secretary of Sta Corporations Division 148 W. River Street

Providence, RI 02904-261 401.222.30

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2012

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(cerd)) is

subject to a penalty fee of \$25.00.	s s s s (es), union con portunos ju	in in the second second	(cport weensth sinity (50) days aj	ur use ume prescribeu by a	iw (R.I.G.L. / -1.2-1)01(coa)) is
1. Corporate ID No. 41675	2. Name of Corporation B. SIGN GRAPHICS, INC.				
3. Street Address Principal Business Office 27 Libera Street			City Cranston	State RI	<i>Ζψ</i> <b>02920</b>
4. Business Phone No. 401-943-6941  5. State of Incorporation Rhode Island					
6. Brief Description of the Character of Printing of signs, etc.	of Business Conducted in R	bode Island			, ,,,,,,
7. NAMES AND ADDRESSES	OF THE OFFICERS:	("X" BOX FOR ATTA	CHMENT)   FILL IN SPA	CES BEFORE USING	ATTACHMENTS
President Name			Vice President Name		
Peter J. Carpentier			Peter J. Carpentier		
Street Address 27 Libera Street			Street Address 27 Libera Street		
Cranston	State RI	<sup>Zip</sup> 02920	City Cranston	RI	<sup>Zp</sup> <b>02920</b>
Secretary Name Peter J. Carpentier			Treasurer Name Peter J. Carpentier		
Street Address 27 Libera Street			Street Address 27 Libera Street		
Cranston	State RI	<sup>Zip</sup> 02920	City Cranston	State RI	<i>¤</i> ф 02920
8. NAMES AND ADDRESSES	OF THE DIRECTORS	S: ("X" BOX FOR ATI	<i>ACHMENT)</i> 🔲 FILL IN SP	ACES BEFORE USIN	G ATTACHMENTS
Director Name			Director Name		
Peter J. Carpentier			None		
Street Address			Street Address		
27 Libera Street  City   State   Zib					
Cranston	State RI	Ζίμ 02920	City	State	Zιp
None			None		
Street Address			Street Address		
City	State	Zip	City	State	Zip
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 State. Changes require an additional filing. See Section 9 of instruction sheet.			Number of Shares	Class/Series	Par Value
			100	Common	No Par Value
This report must be executed this report must be executed or	on behalf of the corp	oration by an authorize	d representative. If the corpo	oration is in the hand	s of a receiver or trustee,
ms report must be executed to	ni benati of the corp.	nation by the receiver t	A trustee.		
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File Date NAT 9 9 2010			108-11		3191,2
MAR 3 3 2012			Signature		Date
Check No			/	ation	Dun
			Peter J/ Carper	iuer	
By:	65		Print or Type Name  Procident		

President