STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State

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

## PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2007 Filing Period: January 1 - March 1 • Filing Fee: \$50.00

			a million district (20) down after the sine a war	orthod by Irw (R I G I 7-12-1501/c&	d)) is subject to a penalty fee of \$25.00.						
* In accordance with R.I.G.L. 7-1.	2-1501(e), each corporation failing	g or refusing to file its annual repor	t within thirty (30) days after the time pres	CLINER OF SEED (TELEVISION 1-110-2 201   DEC							
1. Corporate ID No.		2. Name of Corporation Spectrum Properties, Inc.									
129942	1 .	Toperaes, inc.	T.C.	State	Zip						
3. Street Address Principa			City	1	1 *						
109 AIRPORT RO	8# TINU DAC		WARWICK	RI	02889-						
4. Business Phone No. 5. State of Is											
		RHODE ISL	RHODE ISLAND								
6 Brief Description of the	e Character of Business Co	onducted in Rhode Island									
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President Name			Vice President Name	Vice President Name							
Robert E. DeBl	lois, Jr.		•	•							
Street Address			Street Address	Street Address							
109 AIRPORT RO	AD, UNIT #8		•	•							
City	State	Zip	City	State	製 , +						
Warwick	RI	02889	<b>.</b>								
Secretary Name			Treasurer Name	, , , , , , , , , , , , , , , , , , , ,	ω						
Robert E. DeBl	ois, Jr.		Robert E. Del	Robert E. DeBlois, Jr.							
Street Address			* Street Address								
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Director Name			Director Name								
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Director Name			<ul> <li>Director Name</li> </ul>	·							

City City ISSUED SHARES AUTHORIZED SHARES Par Value Number of Shares Class/Series Par Value Number of Shares Class/Series No Par Common 100 600 NO PAR VALUE 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.

·Street Address

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FOR	SECRETA	(RY (	)FS	CATT	US	ΕO	NLY		

Director Name

Street Address

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.

State

Ζip

Signature Robert E. DeBłois, Jr. Print or Type Name

President

Title

Form 630 12/05