

2. Name of Corporation Great Attitude 401, Inc. A. Ralph Mollis, Secretary of Stat Corporations Divisio: 148 W. River Stree Providence, RI 02904-261. 401.222.304

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR <u>JOO8</u>

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 'aw (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00. 1. Corporate ID No. 160958

3. Street Address Principal Business Office 84 Packard Street			City Cranston	State RI	2φ 302910-2
4. Business Phone No.		5. State of Incorporation Rhode Island	5. State of Incorporation		
6 Brief Description of the Character RETSIL CLOT 7. NAMES AND ADDRESS	hing & DE	£52	TEACHMENT) [FILL IN	J SDACES REEDDE HEING	Regin
President Name	01 1112 077102	ao. (a boa ron a	Vice President Name	SPACES BEFORE USING	ATTACHMENTS
Luis Hernandez			: Luis Hernandez		15 24 5
Street Address			Street Address		
84 Packard Street			84 Packard Street		
City Cranston	State RI	Ζφ 02910	Giy Cranston	State RI	^{Zip} 02910
Secretary Name Luis Hernandez			Treasurer Name Luis Hernandez		
Street Address 84 Packard Street			Street Address 84 Packard Street		
City Cranston	State RI	<i>Ζφ</i> 02910	City Cranston	State RI	<i>Zip</i> 0291 0
8. NAMES AND ADDRESSI	ES OF THE DIRECT	ORS: ("X" BOX FOR	ATTACHMENT) [FILL:	IN SPACES BEFORE USIN	· · · · · · · · · · · · · · · · · · ·
Director Names LUIS H	Ermande	2.	Director Name		
_84 PACKArd ST.			Street Address		
CransTon	State LI	02910	City	State	Zip
Director Name	*************************		Director Name		<u></u>
Street Address			Street Address		<u></u>
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED AUTHORIZED SHARES	("X" BOX FOR AT	TACHMENT)	· ·	D ("X" BOX FOR ATTAC ECTION MUST BE COMPLETED	and the control of th
Number of Shares Class/Series Par Value			Number of Shares	Class/Series	Par Value
2,000 COMM NO PAR VALUE			100	Common	No Par
			#2#1V PH.		
This report must be executed this report must be executed	ed on behalf of the co	orporation by an author rporation by the receive	rized representative. If the er or trustee.	corporation is in the hand	s of a receiver or trustee,
File Date	ED		including any fee	perjury, I declare and affirm to companying schedules and sta and true and correcto	that I have examined this repor atements, and that all statement
Check No			Signature		Date
			Luis Hernandez		
			Print or Type Nam		
FOR CEOPITA BY OF CHIEF YOU CAN'T			President		
FOR SECRETARY OF S	IATE USE ONLY		Title		
					Form 630 Rev. 12/06