

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.

min (N.1. O.L. /-1.2-1 302(C	eass is subject to a pe	many jee of 42 3.00.			
1. Corporate ID No. 3114 47778	173 2. Name of Corp. PER	oration  L SELVICES , IN  5. State of Incorporation  R IN DE	νC -		* ***
3. Street Address Principal Bu	usiness Office DiC		City COVENIZY	siate PC 1	2ip 02816
4 Business Phone No.		5. State of Incorporation			
(401) 828-5	557 9	RINDE	(SL-MV)		
6. Brief Description of the Ch	aracter of Business Conduc	ted in Rhode Island			
7. NAMES AND ADDR	ESSES OF THE OFFI	CERS: ("X" BOX FOR ATT	ACHMENT) 🔲 FILL IN SPA	ACES BEFORE USING A	TTACHMENTS
President Name			Vice President Name		
DALL V. PELLETIER			SHINE		
DALE V. PELLETIER  Street Address 9 OSPREY DIZ.  CITY COVENTRIY  State R 1  02816			Street Address		
Gity	State	Zip Z	City	State	Ζip
COVENTRIY	KI	02816			
Secretary Name			Treasurer Name	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
SAME			SIME		
Street Address			: Street Address		
				· · · · · <u>·</u>	
City	State	Zip	City	State	Zip
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR A Director Name  DILE V. PELLETIER			Director Name		
DME V. PELLETIER  Street Address  G OSPREY DR  City COVENTRY  R1  02816			Street Address		
City COVENTRY	State 12 1	02816	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Ζip	City	State	Zip
9. SHARES AUTHORIZ AUTHORIZED SHARES	ED ("X" BOX FOR	ATTACHMENT)	10. SHARES ISSUED (*) ISSUED SHARES — THIS SECTION	"X" BOX FOR ATTACHM ON <u>MUST</u> BE COMPLETED	MENT)
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
500 commen NO PAR			586 148 444	Common	NO PIIR
			# 15 to 1 t		
•		e corporation by an authorize corporation by the receives	zed representative. If the corp	poration is in the hands of	of a receiver or trustee,

	Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements
File Date FILED	contained herein are true and correct.  Alle V- Pellelia 2/4/08
Check No. FEB 0 5 2008	Signature Date  DACE V. PELLETIEL
By: By D O O O O O O O O O O O O O O O O O O	Print or Type Name  PEESIDENT  Title