



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

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.

1. Corporate ID No 149151		2. Name of Corporation Global Resource Institute of New England Incorporated			
3. Street Address Principal Business Office 928 Atwood Avenue			City Johnston	State RI	Zip 02919
4. Business Phone No (401) 942-8921		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island Dental Instruction and training, All Lawful Purposes					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name John Wade			Vice President Name Richard Napolitano		
Street Address 1600 Warwick Avenue			Street Address 1600 Warwick Avenue		
City Warwick	State Rhode Island	Zip 02889	City Warwick	State Rhode Island	Zip 02889
Secretary Name Ryan Napolitano			Treasurer Name Maria Saccoccio		
Street Address 1600 Warwick Avenue			Street Address 1600 Warwick Avenue		
City Warwick	State Rhode Island	Zip 02889	City Warwick	State Rhode Island	Zip 02889
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name John Wade			Director Name Maria Saccoccio		
Street Address 1600 Warwick Avenue			Street Address 1600 Warwick Avenue		
City Warwick	State Rhode Island	Zip 02889	City Warwick	State Rhode Island	Zip 02889
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> 10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
AUTHORIZED SHARES			ISSUED SHARES -- THIS SECTION MUST BE COMPLETED		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
5,000	Common - No Par Value		N/A		
			THIS SECTION MUST BE COMPLETED		

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.

FILED

File Date: FEB 28 2008

Check No. By: 1013

By: _____

FOR SECRETARY OF STATE USE ONLY

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.

Signature: John Wade Date: 3/24/08

Print or Type Name: John Wade

Title: President