



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

A. Ralph Molits, 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. 39631		2. Name of Corporation Massachusetts Audio Visual Equipment Corporation			
3. Street Address Principal Business Office 755 Middlesex Turnpike			City Billerica	State MA	Zip 01821
4. Business Phone No. 978-670-0027		5. State of Incorporation Massachusetts			
6. Brief Description of the Character of Business Conducted in Rhode Island Rental audio visual equipment.					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Patricia A. Basteri			Vice President Name None.		
Street Address 755 Middlesex Turnpike			Street Address		
City Billerica	State MA	Zip 01821	City	State	Zip
Secretary Name Patricia A. Basteri			Treasurer Name Patricia A. Basteri		
Street Address 755 Middlesex Turnpike			Street Address 755 Middlesex Turnpike		
City Billerica	State MA	Zip 01821	City Billerica	State MA	Zip 01821
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Patricia A. Basteri			Director Name		
Street Address 755 Middlesex Turnpike			Street Address		
City Billerica	State MA	Zip 01821	City	State	Zip
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
12,500	Common	No Par Value	91.7	Common	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.

File Date **FILED**

Check No. **MAR 25 2008**

By: 18921 MAC

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.

Patricia A. Basteri 3/24/08
Signature Date

Patricia A. Basteri

Print or Type Name

President

Title