

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

## 2006 PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

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 fe	e oj \$25.00.				
1. Corporate ID No. 150828	2. Name of Corporation K2 Partnering Solutions (West), Inc.					
Street Address Principal Business Office 39 Pike Street		City Providence	State RI	<sup>Zip</sup> 02903		
		5. State of Incorporation  Delaware	·			
6. Brief Description of the Character of Providing personnel recruitn	nent, consulting and	staffing services.		. Radukarin ng galaga ka	05522499444 <del>94414479</del> 95000000000	
7. NAMES AND ADDRESSES	OF THE OFFICERS:	("X" BOX FOR ALTAC		BEFORE USING AILA	CHMINIS	
President Name			Vice President Name			
James McHugh			None			
Street Address 39 Pike Street			Street Address			
cuy Providence	State RI	<i>Հւր</i> <b>02903</b>	City <sup>,</sup>	State	Ζίρ	
Secretary Name Ronald F. Wnek			Treasurer Name William Burns Crawford			
reet Address Street Address 39 Pike Street 39 Pike Street						
City Providence	State RI	<sup>Zip</sup> 02903	City Providence	State RI	<i>Zip</i> (// <sub>1</sub> ) <b>029</b> 03	
8, NAMES AND ADDRESSES	OF THE DIRECTORS	· ("X" BOX FOR ATI.		ES BEFORE USING AT	IACHMENTS)	
Director Name			Director Name			
James McHugh			Ronald F. Wnek			
Street Address			Street Address			
39 Pike Street			39 Pike Street	<del>_</del>		
City	State	Ζip	City	State	20000	
Providence	RI	02903	Providence	RI	02903 🚊 🗀	
Director Name William Burns Crawford			N/A THE TOTAL STREET ST			
Street Address 39 Pike Street			Street Address		×	
City	State	Zip	СИу	State	Zip	
Providence	RI	02903				
9. SHARES AUTHORIZED ("	X" BOX FOR ATTAC	нивиг) 🗌	10. SHARES ISSUED ("X" BOX FOR ATTACHMENT)  ISSUED SHARES — THIS SECTION MUST BE COMPLETED			
AUTHORIZED SHARES					Day Kales	
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value	
10,000	Α :	\$0.01	1,000	A	\$0.01 	
10,000	В	\$0.01	o THSSECTO	В	\$0.01	
	1. 1. 16 - 6 11		d representative. If the corpora	tion is in the hands of a	raceiver or trustee	

this report must be executed on behalf of the corporation by the receiver or trustee.

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File Date	MAY, 0 6 21	108	
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			4:11
FORS	ECRETARY OF STA	TE 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. 04/30/2008 Date

Rob Fiddaman Print or Type Name

Secretary (current)

## **K2 PARTNERING SOLUTIONS (WEST), INC.**

## **SECRETARY'S CERTIFICATE**

I, Rob Fiddaman, duly elected Secretary of K2 Partnering Solutions (West), Inc., a Delaware corporation (the "Corporation"), hereby certify as follows:

- 1. The contents of the annual report attached hereto were true and accurate as of December 31, 2006.
- 2. The officers and directors listed therein were the then-acting officers and directors of the Corporation.

Witness my hand and seal this 30th day of April , 2008.

Rob Fiddaman, Secretary