

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

401.222.3040

2009

\* 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

Director Name Thomas Boland  Street Address 5 Benefit Street  City Providence RI  Director Name none  Director Name none  Director Name none  Street Address none  Director Name none  Street Address none  Director Name none  Street Address none  Street Address none	Zip   02904-0000		
3. Street Address Frincipal Business Office  S Benefit Street  A Business Principal Business Office  Business Principal  S State of Incorporation  RI  S State of Incorporation  RI  S State of Description of the Character of Business Conducted in Rhode Island to operate a janitorial and building maintenance service  7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX POR ATTACHMENT)   FILL IN SPACES BEFORE USING ATTA  Thomas Boland  Street Address  5 Benefit Street  City  Providence  RI  O2904- Providence  RI  O2904- Providence  RI  Street Address  5 Benefit Street  City  Providence  RI  O2904- Providence  Street Address  5 Benefit Street  City  Providence  RI  O2904- Providence  RI  O2904- Providence  Street Address  5 Benefit Street  City  Providence  RI  O2904- Providence  State  O2904- Providence  RI  O2904- Providence  RI  O2904- Providence  RI  O2904- One  One  One  Street Address  One  One  One  One  One  One  One	02904-0000  TTACHMENTS		
Secondary Name   State   Sta	02904-0000  TTACHMENTS		
Society Name   State	TTACHMENTS Zip		
Comparison of the Character of Business Conducted in, Blooke Island to operate a janitorial and building maintenance service    Trans And Address	Zip		
6. Brief Description of the Character of Business Conducted in Rhock Island to operate a janitorial and building maintenance service  7. NAMES AND ADDRESSES OF THE OFFICERS: ("S." BOX FOR ATTACHMENT)   FILL IN SPACES BEFORE USING ATTACHMENT   President Name Thomas Boland  Street Address 5 Benefit Street  City	Zip		
Thomas Boland  Street Address 5 Benefit Street  City Providence RI  Street Address Thomas Boland  S	Zip		
Thomas Boland  Street Address  5 Benefit Street  City Providence RI  02904- Providence RI  02904- Providence RI  Thomas Boland  Street Address  Street Address  Freutsurer Name Thomas Boland  Street Address  Director Name Thomas Boland  Street Address  Street Address  Thomas Boland  Street Address  Street Address  Thomas Boland	Zip		
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Providence RI 02904- Providence RI  Secretary Name Thomas Boland  Street Address 5 Benefit Street  City Providence RI 02904- Providence RI  8. NAMES AND ADDRESSES OF THE DIRECTORS: (*** BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING AT Director Name Thomas Boland  Street Address 5 Benefit Street  City Providence RI 02904- City Fill IN SPACES BEFORE USING AT none  City Providence RI 02904- City State none  City Providence RI 02904- City none none  Street Address none  City State RI 02904- City State none  City State Name none  Street Address none  City State RI 02904- City State none  City State Name none  Street Address none  City State Street Address none	•		
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Providence RI 02904- Providence RI  B. NAMES AND ADDRESSES OF THE DIRECTORS: (CX* BOX FOR ATTACHMENT)   FILL IN SPACES BEFORE USING ATTACHMENT   FILL IN SPACES BEFORE USING ATT			
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9. SHARES AUTHORIZED. 10. SHARES ISSUED ("X" BUX FOR ATTACHMEN	(ENT)		
ISSUED SHARES — THIS SECTION MUST BE COMPLETED	a plantage manage was real man. " contract to the collection of the		
This is a substitute of the Constant of Number of Shares Class/Series			
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of 100 Common	Par Value		
instruction sheet.  THIS SECTION MUST BE COME	Par Value No Par		
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This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a			

File Date		/. <u>-</u> ,	5-	09	7
Check No.			05		
By:		ارر	m	ne	1)
	FOR SEC				

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.

Thomas	Belend	1/05/09
Signature	Da	ite
Thomas Boland		

Print or Type Name President