



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 2009

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. 31835		2. Name of Corporation PROPRINT INCORPORATED			
3. Street Address Principal Business Office 1145 Atwood Avenue			City Johnston	State RI	Zip 02919-0000
4. Business Phone No. (401) 944-3855		5. State of Incorporation RI			
6. Brief Description of the Character of Business Conducted in Rhode Island printing services					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Ronald F. DeStefano			Vice President Name David M. DeStefano		
Street Address 62 Countryside Drive			Street Address 46 Fox Ridge Drive		
City North Providence	State RI	Zip 02904-	City Cranston	State RI	Zip 02921-
Secretary Name Nancy E. DeStefano			Treasurer Name Ronald F. DeStefano		
Street Address 62 Countryside Drive			Street Address 62 Countryside Drive		
City North Providence	State RI	Zip 02904-	City North Providence	State RI	Zip 02904-
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Ronald F. DeStefano			Director Name Nancy E. DeStefano		
Street Address 62 Countryside Drive			Street Address 62 Countryside Drive		
City North Providence	State RI	Zip 02904-	City North Providence	State RI	Zip 02904-
Director Name none			Director Name none		
Street Address none			Street Address none		
City none	State none	Zip none	City none	State none	Zip none
9. SHARES AUTHORIZED					
10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐					
ISSUED SHARES — THIS SECTION MUST BE COMPLETED					
Number of Shares 100			Class/Series Common		Par Value No Par
THIS SECTION MUST BE COMPLETED					
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.					

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 1-12-09
Check No. 8319
By: MNC
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.

Ronald F. DeStefano 01/05/09
Signature Date

Ronald F. DeStefano

Print or Type Name

President

Title