

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 subject to a penalty fee of \$25.00.	annual report within thirty (30) days after	the time prescribed by t	aw (R.I.G.L, 7-1,2-1501(c&d)) is	
1. Corporate ID No. 2. Name of Corporation 104567 The Red CARPET	COMPANY INC			
3. Street Address Principal Business Office 463 Worces for Rd Suite 405	Framingham	State MA	<sup>Zip</sup> 01701	
4. Business Phone No. 5. State of Incorporation 508 270 - 2777 MASSA	chusetts			
6. Brief Description of the Character of Business Conducted in Rhode Island				
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR AZ		ES BEFORE USING	ATTACHMENTS	
President Name Richard 6. TAYlor	Vice President Name	Vice President Name  ED WAND J. DV: 50011		
Street Address 33 Huckle berry Rd.	Street Address 10 Temi	Street Address		
Hopkiston Sune MA. 21001748	Hollished	State MA	Zip 61746	
KAthleen A. TAylor	Kath Leen	KAthleen A TAYLOV		
33 Huckleberry Rd.	Street Address 33 Hu	ikle ben	y pd	
Hopkinton State Ma. 240 01748 8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR A	Hopkinton	State MA.	Zip O 1748 NG ATTACHMENTS	
Richard G. TAYlor	Director Name	CES BEFORE USIN	NO ATTACOMENTS	
33 Huckle bean Rd.	Street Address			
Hopkinton State Ma. 210 1748	City	State	Zip	
Edward J. Driscoll	Director Name	••••••		
Street Address 10 Temi Rel.	Street Address			
Holliston MA. 210 01746	City	State	Zip	
9. SHARES AUTHORIZED	10. SHARES ISSUED ("X"		I	
This information is currently of record in the Office of the Secretary of	ISSUED SHARES — THIS SECTION  Number of Shares	Class/Series	Par Value	
State. Changes require an additional filing. See Section 9 of instruction sheet.	None	2		
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 receive	er or trustee.		· .	
			that I have examined this report atements, and that all statements	
1-12-19	contained berein are fue	and/correct.	16/00	
File Date	Schaure	, jugur	Date 19/09	
Check No. 20792	Richard	G. TAY	lor	
By:	Print or Type Name	<i>L</i>	•	
FOR SECRETARY OF STATE USE ONLY	Title	<u></u>	Town 620 Day 09/09	