

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

bject to a penalty fee of \$25.00 . Corporate ID No.	2. Name of Corp	oration			
156707	TCA Group				
Street Address Principal Bust 1140 Reservoir Aver	reet Address Principal Business Office 40 Reservoir Avenue			State R1	<sup>Zip</sup> 02920
Business Phone No.  5. State of Incorporation Rhode Island					
Brief Description of the Char	acter of Business Conduc	ted in Rhode Island	·		
	cone on Title Oper	CERS: ("X" BOX FOR ATTA	CHMRNT) □ FILLU	N SPACES BEFORE USING	ATTACHMENTS
resident Name	SSES OF THE OFFI	CERS: ( A DOM TON 11111	Vice President Name		
John McCarthy, Jr.			Carol B. Gray		
itreet Address			Street Address		
40 Battery Street-Ap	t. 607				
Шұ	State	Ζίρ 00400	City	State	Zip
Boston	MA	02109			
Secretary Name			: Treasurer Name : John J. McCarthy, Jr.		
Carol B. Gray Street Address			Street Address		
			40 Battery Street-Apt. 607		
City	State	Zip	City	State	Zip
,, ·			Boston	MA	02109
B. NAMES AND ADDRE	SSES OF THE DIRI	ECTORS: ("X" BOX FOR AT		L IN SPACES BEFORE USIN	IG ATTACHMENTS
Director Name			Director Name		
John J. McCarthy, Jr	<u>,                                    </u>		Street Address		
Street Address	. 007		Street Aduress		
40 Battery Street-Ap	t. 607 State	Zip	City	State	Zip
City Roston	MA	02109			
Boston Director Name	TiM2		Director Name		
SWEET (TAILE			•		
Street Address			Street Address		
		<u> </u>			
City	State	Zip	City	State	Zip
				TEN CHUR DON FOR PTELL	CHMPNT)
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT)  ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
<del></del>			No see house of Kingman	Class/Series	Par Value
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of					
			1000	Common	0.01
instruction sheet.					
This report result by and	outed on bahalf of	the corporation by an authoriz	zed representative. If t	he corporation is in the han-	ds of a receiver or tru
this report must be exe	cuted on behalf of t	he corporation by the received	r or trustee.	p	
ans report must be exe-					

<del>_</del>	Under penalty of penjury, I declare and affirm including any accompanying schedules and s
File Date FILED	contained herein are true held correct
Check No. JAN 1 4 2009	JOHN MCCARTHY, JR.
By:	Print or Type Name PRESIDENT
FOR SECRETARY OF STATE USE ONLY	Title

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Under penalty of pegiury, 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
Signature / Date
JOHN MCCARTHY, JR.
Print or Type Name
PRESIDENT
Tula

Form 630 Rev. 08/08