RI SOS Filing Number: 200940402230 Date: 01/15/2009 4:00 PM

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Corporations Division
148 W. River St.
Providence, RI 02904-2615
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2008

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.	2. Name of Corporation			
145466	A. CAIRO TRANSPORT, INC. c/o MARK NATALE			
3. Street Address Principal Business Office		City	State	Zip
P.O. BOX 575 / 13 ERNEST DRIVE		No. SCITUATE	RI	02857
4. Business Phone No.	5. State of Incorporation			
401-473-5108	RHODE ISLAND			

6. Brief Description of the Character of Business Conducted in Rhode Island

7. NAMES AND ADDRESSES OF THE OFFICERS: *("X" BOX FOR ATTACHMENT)* ☐ FILL IN SPACES BEFORE USING ATTACHMENTS

President Name	Vice President Name
MARK L. NATALE	SAME
Street Address	Street Address
13 ERNEST Drive	
City / State / Zip	City / State / Zip
No. SCITUATE / RI / 02857	
Secretary Name	Treasurer Name
SAME	SAME
Street Address	Street Address
City / State / Zip	City / State / Zip

8. NAMES AND ADDRESSES OF THE DIRECTORS: *("X" BOX FOR ATTACHMENT)* ☐ FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name	Director Name
MARK L. NATALE	
Street Address	Street Address
13 ERNEST Dr.	
City / State / Zip	City / State / Zip
No. SCITUATE / RI / 02857	
Director Name	Director Name
Street Address	Street Address
City / State / Zip	City / State / Zip

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9. SHARES AUTHORIZED *("X" BOX FOR ATTACHMENT)* ☐

AUTHORIZED SHARES		
Number of Shares	Class/Series	Par Value
100		-0-

10. SHARES ISSUED *("X" BOX FOR ATTACHMENT)* ☐

ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
Number of Shares	Class/Series	Par Value
100		-0-

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.

[redacted]

Under penalty of perjury, I declare and affirm that I have examined this repor including any accompanying schedules and statements, and that all statemen contained herein are true and correct.

Signature — *Date* 1/5/09

MARK L. NATALE
Print or Type Name

PRESIDENT
Title

[redacted]

File Date	FILED
Check No.	JAN 15 2009
By: 30261-10-31669	By 078156

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Form 630 Rev. 08/06