

A. Ralpb Mollis, Secretary of State Corporations Division 148 W. River Street Providence, RI 02904-2615 401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR <u>2009</u>

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\u00fcd)) is

subject to a penalty fee of \$25.00	2.		aus report wishin thirty (50) talys t	agier ine time prescribed by d	w (K.I.G.L. /-1.2-1501(cera)) is
1. Corporate ID No. 44469	2. Name of Corporati	ON DMAN ADVERTIS	SING. INC.		
3. Street Address Principal Busin 260 MAPLE A	ress Office 🕜	•	BARRINGTON	State RI	^{Zip} 02806
4. Business Phone No. 401 - 247 - 5	1770	5. State of Incorporation RHODE ISI	LAND		
6. Brief Description of the Chara		n Rhode Island			
Advertising 7. names and addres	SES OF THE OFFICER	S: ("X" BOX FOR ATTA	CHMENT) 🔲 FILL IN SPA	ACES BEFORE USING	ATTACHMENTS
Joseph D. Friedman			Vice President Name		
Street Address 2100 Maple Avenue (Rear)			Street Address		
City Raceington	State OT	^{Zip} 02806	City	State	Zip
Secretary Name			Treasurer Name		
LISA K. Triedman			Street Address		
260 Maple Avenue (Rear)					
Barrington	RI RI	^{zip} 02806	City	State	Zip
B. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATT Director Name			TACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Director Name		
Street Address			Street Address		
Cuy	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
Сйу	State	Zip	Сйу	State	Zip
SHARES AUTHORIZE		l E	10. SHARES ISSUED (ISSUED SHARES — THIS SECT		
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.			Number of Shares	Class/Series	Par Value
			500		1.00
		orporation by an authorize	d representative. If the cor or trustee.	poration is in the hand	ls of a receiver or trustee,
					that I have examined this repatements, and that all statem
			contained herein are	true and correct.	_
FILED		-	Signature .	truduan	1 - 26 · 09 Date
Check No)	-	Joseph D	Friedman	
JAN 2 8 2003	,),	.	Print or Type Name	L	
By FOR SECRETARY	F-STATE USE ONLY		Title Tresiden		