

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

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. STOLARY State 02747 State of Incorporation 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 Nd. 027 Street Address 02747 02101 8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) [FILL IN SPACES BEFORE USING ATTACHMENTS Director Name Director Name Street Address Street Address ZipState City $Z \varphi$ City Director Name Director Name Street Address Street Address Zip State City State City 10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) 9. SHARES AUTHORIZED ISSUED SHARES — THIS SECTION MUST BE COMPLETED Par Value ClasySeries Number of Shares This information is currently of record in the Office of the Secretary of ŢD 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 at lector r trustee. if perjugy, I declare and affirm that I have examined this report. Under peraky d statements, and that all statements including any contained herein File Date Signature Check No ~ 24 Print or Type Name FOR SECRETARY OF STATE USE ONLY Form 630 Rev. 08/08