



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 02904-2611
401.222.304

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 subject to a penalty fee of \$25.00.

1. Corporate ID No. 148184	2. Name of Corporation TCM, Inc.
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3. Street Address Principal Business Office 89 WISTERIA DRIVE	City COVENTRY	State RI	Zip 02816
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4. Business Phone No. 4015757335	5. State of Incorporation RHODE ISLAND
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6. Brief Description of the Character of Business Conducted in Rhode Island
TO OPERATE A "THE UPS STORE," A UNITED PARCEL SERVICE FRANCHISE.

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

President Name ANTHONY J. MONTALBANO	Vice President Name
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Street Address 89 WISTERIA DRIVE	Street Address
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City COVENTRY	State RI	Zip 02816	City	State	Zip
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Secretary Name ANTHONY J. MONTALBANO	Treasurer Name ANTHONY J. MONTALBANO
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Street Address 89 WISTERIA DRIVE	Street Address 89 WISTERIA DRIVE
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City COVENTRY	State RI	Zip 02816	City COVENTRY	State RI	Zip 02816
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8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name	Director Name
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Street Address	Street Address
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City	State	Zip	City	State	Zip
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Director Name	Director Name
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Street Address	Street Address
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City	State	Zip	City	State	Zip
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9. SHARES AUTHORIZED

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.

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

ISSUED SHARES — THIS SECTION **MUST** BE COMPLETED

Number of Shares	Class/Series	Par Value
100	COMMON	NO PAR VALUE

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.

File Date

FILED

Check No. FEB 12 2009

By: By 1792

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, 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

ANTHONY J. MONTALBANO

Print or Type Name

PRESIDENT

Title