



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 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. 13375		2. Name of Corporation ERIVA + CO UNL. JNC.			
3. Street Address Principal Business Office 258 LIBERTY STR.			City PAWTUCKET	State RJ.	Zip 02861
4. Business Phone No. 401-726-6141		5. State of Incorporation R.I.			
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 ERIVA FORSTER			Vice President Name PIROSHKA FORSTER PRICE		
Street Address 26 ELLENDALE RD.			Street Address 26 ELLENDALE RD.		
City SO-ATTL.	State MA	Zip 02703	City SO-ATTL.	State MA	Zip 02703
Secretary Name PIROSHKA FORSTER PRICE			Treasurer Name ERIVA FORSTER		
Street Address 26 ELLENDALE RD.			Street Address 26 ELLENDALE RD.		
City SO-ATTL.	State MA	Zip 02703	City SO-ATTL.	State MA	Zip 02703
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		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐		
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.			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.

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: ERIVA FORSTER Date: 2-12-09
Print or Type Name: ERIVA FORSTER
Title: PRES.

FILED	
File Date	<u>FEB 17 2009</u>
Check No.	<u>3419</u>
By:	<u>[Signature]</u>
FOR SECRETARY OF STATE USE ONLY	