

3. Street Address Principal Business Office +117 Main Street / 8 So. Hazo

2. Name of Corporation

Vogue Communications Systems, Inc.

L. Corporate ID No.

112178

A. Ralph Mollis, Secretary of State
Corporations Division
1/8 W. River Street
Providence, RI 02904-2615
401.222,3040

Zip

02895

RI

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.

City Woonsocket

4.01-762-2200		Rhode Island	Rhode Island			
6. Brief Description of the Chara To develop and install o	ommunications sy	stems				
	SES OF THE OFFI	CERS: ("X" BOX FOR A	ATTACHMENT) [ FILL II	N SPACES BEFORE USIN	NG ATTACHMENTS	
President Name			vice President Name			
Marie Deschenes			Street Address			
Street Address  117 Main Street 68 50 MAIN ST.  Cay Woonsocket RI 02895						
City Woonsocket	State RI	<sup>2版</sup> 02895	СНу	State	Zψ	
Secretary Name Marie Deschenes			Treasurer Name Marie Deschenes  Street Address  147 Main Street & S.O. MAIN ST.  City Woonsocket RI 02895			
Street Address			Street Address			
117 Main Street 6	8 50.1	MAIN ST	<del>117</del> Main Street	68 SO MA.	IN ST.	
City Woonsocket	State RI	MAIN ST 02895	<i>ċι⊕</i> Woonsocket	State RI	2年 <b>0289</b> 5	
8. NAMES AND ADDRES	SES OF THE DIRE	CTORS: ("X" BOX FOR	RATTACHMENT) 🗌 FILL	IN SPACES BEFORE US	SING ATTACHMENTS	
Marie Deschenes			Director Name			
Street Address  117 Main Street 68 SO MAIN ST.  Gity State Zip			Street Address			
			City	State	Zip	
Woonsocket RI 02895 Director Name			Director Name			
Street Address			Street Address			
				Line		
Gity 	State	Zip	City	State	Zip	
9. SHARES AUTHORIZE AUTHORIZED SHARES	D ("X" BOX FOR	ATTACHMENT)		É <b>D <i>("X" BOX FOR ATT.</i> S SECTION <u>MUST</u> BE COMPLE</b>		
Number of Shares Class/Series Par Value			Number of Shares	Class/Scries	Par Value	
1,000 No Par Value			100	Α	No Par Value	
			pace S			
This report must be executhis report must be executhis			eiver or trustee. Under penalty	of perjury, 1 declare and aff	ands of a receiver or trustee.	
File Date 2-/	9-09	· · · · · · · · · · · · · · · · · · ·	contained here  Marie De	in are true and correct.  Auschemes	d statements, and that all statements $\frac{2-10-09}{Date}$	
By:			Print or Type Name  PRESIDENT			
FOR SECRETARY C	OF STATE USE ONLY		Title		Form 630 Rev. 12/06	