

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. 7-1.2-150).

subject to a penalty fee of \$25.00.		on juning or rejusing to file its an	nual report within thirty (30) days aft	ter the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is
1. Corporate ID No.	2. Name of Corpora		4- 7		<u> </u>
3. Street Address Principal Business	Office	THE THE PIZ	-irian, mD	INC	
	Robin 1	Road	Lincoln	State RI	Zip (2) 3 :20 (2
4 Business Phone No. 5 State of Incorporation					07862
401-334-1133			Rhode Is	Such	
6. Brief Description of the Character	of Business Conducted	in Rhode Island		iaria	
7 NAMES AND ADDRESS					
			CHMENT) [FILL IN SPACE	CES BEFORE USING AT	TACHMENTS
Jani	ce M.	Kizirian	Vice President Name N 14		
Street Address	1 7	11/21/14/1	Street Address		<u></u>
× 6.0	ke Rob	in Road			
Lincoln	State 2 -	CA365	City	State	Zip
Secretary Name	1 1 1	1 67803			
			Treasurer Name		
Street Address			Janice Mikizirian		
			2 whe Robin Rd		
CÚy	State	Zip	City	State _	Zip
8 NAMES AND ADDRESSES	OF THE DIRECT		Lincoln	15-I	Z 100 1
8. NAMES AND ADDRESSES Director Name	OF THE DIRECTO	ORS: ("X" BOX FOR ATT	TACHMENT) TILL IN SPA	ACES BEFORE USING A	ATTACHMENTS
_			Director Name		
Street Address			Street Address		
City	State	Zip	СЦу	State	Zip
Director Name	.J]	***************************************		
			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED	ł		:	1	
600 No Par Value			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT)		
			ISSUED SHARES — THIS SECTION Number of Shares		
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of			Number of Spares	Class/Series	Par Value
instruction sheet.			GOU SHARES	Common	Jacob Control
			,,,,,,	CONTINION	Mr Far Value
Th'					
This report must be executed this report must be executed of	on behalf of the co	rporation by an authorize	d representative. If the corpor	ation is in the hands of	a receiver or trustee
this report must be executed of	on benail of the cor	poration by the receiver of	or trustee.		and the state of t
			Under penalty of perjury	, I declare and affirm that I	have examined this report,
ELLER		7	contained herein are true	ying schedules and stateme	ents, and that all statements
File Date FILED]	V 900= 15	with COHOUL	
Check No.EB 2 0 2009			Signature Date		
Check No. LD Z V 2003			Townson A Land		
By: By			Print or Type Name		
	FE WAR COMM		President		
FOR SECRETARY OF STATE	USE ONLY		Title	17	<u> </u>