

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. 152773	2. Name of Corp. Amazar An					
3. Street Address Principal Business Office One Kenney Drive			City Cranston	State RI	Zip 02920	
4. Business Phone No. 401-463-6400		5. State of Incorporat Rhode Island				
	haracter of Business Conduc and distribute various					
7. NAMES AND ADDI President Name	RESSES OF THE OFFI	CERS: ("X" BOX FOR A	TTACHMENT) TILL IN Vice President Name	SPACES BEFORE USING	ATTACHMENTS	
None			Aaron White, Vice President			
Street Address			Street Address			
				One Kenney Drive		
City	State	Ζίρ	City Cranston	State RI	^{Ζφ} 02920	
Secretary Name Edward J. Capobianco			Treasurer Name Douglas P. Brown			
Street Address One Kenney Drive			Street Address One Kenney Drive			
City Cranston	State RI	^{Zip} 02920	City Cranston	State RI	^{Zip} 02920	
	RESSES OF THE DIRE	CTORS: ("X" BOX FOR	ATTACHMENT) [FILL 1	IN SPACES BEFORE USIN	G ATTACHMENTS	
Director Name None-RI Close Co	rporation		Director Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
Director Name			Director Name			
Street Address			Street Address			
Ciţv	State	Zip	City	State	Zip	
9. SHARES AUTHORI AUTHORIZED SHARES	 ZED <i>("X" BOX FOR</i> .	 ATTACHMENT) []		D ("X" BOX FOR ATTACL		
Number of Shares Class/Series Par Value			Number of Shares	SECTION MUST BE COMPLETED Class/Series	Par Value	
4,000 Common 0.01 Par Value			300	Common	0.01 Par Value	
					11	
		e corporation by an auth corporation by the rece	orized representative. If the iver or trustee.	corporation is in the hand.	s of a receiver or trustee,	
			including any ac	perjury, I declare and affirm to perpanying schedules and sta		
FIL File Date	ED		cont de lereix	are the antireo rect.		
FFB 2	0 2009		Signatur		Date	
By //	9199		Edward J. Print or Type Nan	Capobianco		
EOR SECRETAR	RY OF STATE USE ONLY		**	Secretary		
FOR SECRETAR	CI OF STATE USE UNLY		Title		Form 630 Rev. 12/06	