



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. 19139		2. Name of Corporation Yarn Corporation of America			
3. Street Address Principal Business Office 175 Greenwood Avenue		City East Providence	State RI	Zip 02916	
4. Business Phone No. 401-434-4900		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island yarn dealer					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Leonard I. Lazarus			Vice President Name Barbara G. Lazarus		
Street Address 175 Greenwood Avenue			Street Address 175 Greenwood Avenue		
City East Providence	State RI	Zip 02916	City East Providence	State RI	Zip 02916
Secretary Name Leonard I. Lazarus			Treasurer Name Leonard I. Lazarus		
Street Address As Above			Street Address As Above		
City	State	Zip	City	State	Zip
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Leonard I. Lazarus			Director Name None		
Street Address As Above			Street Address		
City	State	Zip	City	State	Zip
Director Name None			Director Name None		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED					
10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐					
ISSUED SHARES — THIS SECTION MUST BE COMPLETED					
Number of Shares 58		Class/Series Common		Par Value No par	
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.					

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.

FILED	
File Date	FEB 24 2009
Check No.	
By:	By 1546
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 Leonard I. Lazarus Date 2/23/09
Leonard I. Lazarus
Print or Type Name
President
Title