

2. Name of Corporation

VINYL CÓNCEPTS, INC.

1 Corporate ID No. 128357

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.

Second photoprocessor Second photoprocessor Second photoprocessor Second photoprocessor Second photoprocessor Second per Conserved photoprocessor Second per Conserved photoprocessor Second per Conserved photoprocessor Second per Conserved photoprocessor Second photoprocessor Second per Conserved photoprocessor Second per Conserved photoprocessor Second per Conserved photoprocessor Second photoprocessor Second per Conserved photoprocessor Second photo	3. Street Address Princip. 11 KINGSWOO			COVENTRY	State	Zip
COUNTY COVENTRY RI O2816 COVENTRY COVENTRY RI O2816 COVENTRY	4. Business Phone No. 5. State of Incorpor				T KI	02816
TO CONDUCT A CONSTRUCTION BUSINESS. 7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS PROJECT OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS CHRISTIAN SWEET COVENTRY RI COVENTRY R	(401) 265-7198 RHODE ISL					
Weet Proceeded Address Street Addres	TO CONDUCT A	e Character of Business Conduct CONSTRUCTION BUSI	ed in Rhode Island NESS.			
Weet Proceeded Address Street Addres	7. NAMES AND AD	DRESSES OF THE OFFIC	CERS: ("X" BOX FOR A	ATTACHMENT) [FILL IN 9	SPACES BEFORE USING	ATTACHMENTS
Shore Address TH KINGSWOOD DRIVE TH KINGSWOOD DRIVE COVENTRY RI D2816 D28	President Name			Vice President Name		
11 KINGSWOOD DRIVE COVENTRY RI O2816 COVENTRY Sums Date COVENTRY RI O2816 COVEN						
COVENTRY RI 02816 COVENTRY RI 02816 COVENTRY RI 02816 COVENTRY Share CHRISTIAN SWEET Sheet Address 11 KINGSWOOD DRIVE COVENTRY RI 02816 CO	11 KINGSWOOD DRIVE					
CHRISTIAN SWEET Street Address 11 KINGSWOOD DRIVE Street Address 11 KINGSWOOD DRIVE COVENTRY RI 02816 COVENTRY RI 02816 COVENTRY RI 02816 RI 02816 COVENTRY RI 02816 RI	COVENTRY					
11 KINGSWOOD DRIVE COVENTRY RI O2816 NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Director Journal OFFICE Address However, Address Director Journal OVERNITY RI O2816 OUT State OUT Stat	•	EET			т	
COVENTRY RI 02816 COVENTRY RI 02816 COVENTRY RI 02816 8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Director Spanse CHRISTIAN SWEET Street Address 11 KINGSWOOD DRIVE COY COVENTRY RI 02816 Director Spanse Street Address Street Address				·		
COVENTRY RI	•				····	Zip
CHRISTIAN SWEET Storet Address 11 KINGSWOOD DRIVE City COVENTRY RI 02816 Director Name Director Name Director Name Storet Address Storet Address 10. SHARES AUTHORIZED C'X" BOX FOR ATTACHMENT) 10. SHARES ISSUED ('X" BOX FOR ATTACHMENT) SINUED SHARES THIS SECTION MUST BE COMPLETED Number of Values R,000 COMMON \$.01 1,000 COMMON \$.01 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 statement contained herein are true and corpect. Linder penalty of perjury, I declare and affirm that I have examined this report including any accompanying schedules and statements, and that all statement contained herein are true and corpect. Linder penalty of perjury, I declare and affirm that I have examined this report including any accompanying schedules and statements, and that all statement contained herein are true and corpect. Linder penalty of perjury, I declare and affirm that I have examined this report including any accompanying schedules and statements, and that all statement contained herein are true and corpect. Linder penalty of perjury, I declare and affirm that I have examined this report including any accompanying schedules and statements, and that all statement contained herein are true and corpect. Linder penalty of perjury, I declare and affirm that I have examined this report including any accompanying schedules and statements. Linder penalty of perjury, I declare and affirm that I have examined this report including any accompanying schedules and statements. Linder penalty of perjury, I declare and affirm that I have examined this report including any accompanying schedules and statement. Linder penalty of perjury, I declare and affirm that I have exam		į.				02816
CHRISTIAN SWEET Street Address Meyer Address Meyer Address Meyer Address Meyer Address Director Name Namber of Shares Namber of Shares Reconstruction 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. 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 statement contained herein are true and corpect. Under penalty of perjury, I declare and affirm that I have examined this report including any accompanying schedules and statements, and that all statement contained herein are true and corpect. Under penalty of perjury, I declare and affirm that I have examined this report including any accompanying schedules and statements, and that all statement contained herein are true and corpect. Under penalty of perjury, I declare and affirm that I have examined this report including any accompanying schedules and statements, and that all statement contained herein are true and corpect. Under penalty of perjury, I declare and affirm that I have examined this report including any accompanying schedules and statements, and that all statement contained herein are true and corpect. Under penalty of perjury, I declare and affirm that I have examined this report including any accompanying schedules and statements. Other Name Person Nam	8. NAMES AND AD Director Name:	DRESSES OF THE DIREC	TORS: ("X" BOX FOR		SPACES BEFORE USING	G ATTACHMENTS
11 KINGSWOOD DRIVE CATY COVENTRY RI 02816 Director Name Director Name Street Address Str		EET		Director Name		
COVENTRY RI 02816 Director Name D				Street Address		
COVENTRY RI 02816 Director Name Street Address Street Addre						
Director Name Director Name	*		i '	City	State	Zip
Shares Authorized ("X" BOX FOR ATTACHMENT) 10. Shares ISSUED ("X" BOX FOR ATTACHMENT) ISSUED SHARES — THIS SECTION MUST BE COMPLETED Number of Ybaves	Director Name	<u>J.N.</u>]02616	Director Name		
Shares Authorized ("X" BOX FOR ATTACHMENT) 10. Shares ISSUED ("X" BOX FOR ATTACHMENT) ISSUED SHARES — THIS SECTION MUST BE COMPLETED Number of Ybaves						
9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) 10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ISSUED SHARES — THIS SECTION MUST BE COMPLETED Number of Ybares Class/Series Par Value 8,000 COMMON \$.01 1,000 COMMON \$.01 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 statement contained herein are true and correct. Signature CHRISTIAN SWEET Print or Type Name PRESIDENT Title	Street Address			Street Address		
ISSUED SHARES — THIS SECTION MUST BE COMPLETED Number of Shares Class/Series Par Value Number of Shares Class/Series Par Value 8,000 COMMON \$.01 1,000 COMMON \$.01 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 statement contained herein are true and correct. Signature Date CHRISTIAN SWEET Print or Type Name PRESIDENT Title	City	State	Zip	Сіцу	State	Zip
Number of Shares Class/Series Par Value Number of Shares Class/Series Par Value 8,000 COMMON \$.01 1,000 COMMON \$.01 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 statement contained herein are true and correct. Check No. CHRISTIAN SWEET Print or Type Name PRESIDENT Title		RIZED ("X" BOX FOR A	TTACHMENT)			IMENT) [
8,000 COMMON \$.01 1,000 COMMON \$.01 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 statement contained herein are true and correct. Signature Check No. CHRISTIAN SWEET Print or Type Name PRESIDENT Title	At all the state of the state o					
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 statement contained herein are true and correct. Signature CHRISTIAN SWEET Print or Type Name PRESIDENT Title	8,000	COMMON	\$.01			
Under penalty of perjury, I declare and affirm that I have examined this report including any accompanying schedules and statements, and that all statement contained herein are true and correct. Check No. Check No. Check No. 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 statement contained herein are true and correct. CHRISTIAN SWEET Print or Type Name PRESIDENT Title			4.0 1	1,3000	COMMON	Ψ.ΟΙ
Under penalty of perjury, I declare and affirm that I have examined this report including any accompanying schedules and statements, and that all statement contained herein are true and correct. Check No. Check No. Check No. 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 statement contained herein are true and correct. CHRISTIAN SWEET Print or Type Name PRESIDENT Title						
Under penalty of perjury, I declare and affirm that I have examined this report including any accompanying schedules and statements, and that all statement contained herein are true and correct. Check No. Check No. Check No. 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 statement contained herein are true and correct. CHRISTIAN SWEET Print or Type Name PRESIDENT Title	This report must be	executed on behalf of the	corporation by an author	orized representative. If the co	orporation is in the hands	of a receiver or trustee,
including any accompanying schedules and statements, and that all statement contained herein are true and correct. Signature CHRISTIAN SWEET Print or Type Name PRESIDENT Title	this report must be e	executed on behalf of the	corporation by the recei	ver or trustee.		,
including any accompanying schedules and statements, and that all statement contained herein are true and correct. Signature CHRISTIAN SWEET Print or Type Name PRESIDENT Title						
including any accompanying schedules and statements, and that all statement contained herein are true and correct. Check No. 2017 Signature CHRISTIAN SWEET Print or Type Name PRESIDENT Title						
Check No. 2017 By: Manue Contained herein are true and correct. Signature CHRISTIAN SWEET Prins or Type Name PRESIDENT Title				Under penalty of pe	erjury, I declare and affirm the	nat I have examined this repor
Check No. 2017 Check No. 2017 By: MMC FOR SECRETARY OF STATE USE ONLY Check No. 21869 Signature Date CHRISTIAN SWEET Print or Type Name PRESIDENT Title	2	27 10		contained herein ar	e true and correct.	ements, and that all statemen
Check No. CHRISTIAN SWEET By: Trin or Type Name PRESIDENT Title	File Date	-23-07	_	Christa	Jums C	2/18/09
By: CHRISTIAN SWEET Prins or Type Name PRESIDENT Title	Check No	2017		Signature		Date
FOR SECRETARY OF STATE USE ONLY PRESIDENT Title	CHELK INIV.	000 000	_	***************************************	SWEET	
Title	Ву:		778MA:::			
	FOR SECRETA	ARY OF STATE USE ONLY				
				Title		Form 630 Rev. 12/06