

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. 7-1,2-150). nual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is

* In accordance with R.I.G.L. /-1,2-13 subject to a penalty fee of \$25.00.	501(e), each corporation jui	ung or rejusing to jue us united	a report to the state of the state of the		
1. Corporate ID No. 92042	2. Name of Corporation Traction Software, Inc.				
			PROVIDENCE	State C	02906
401-528-1145 RHODE ISL		5. State of Incorporation RHODE ISLAND			
6. Brief Description of the Character of TO DEVELOP SOFTWARE	SYSTEMS.				
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTAC President Name BNEGONY LLOYD			CHUSTOPHER NUZUM		
Street Address 446 MORRIS AVE			Street Address LOW DEN ST		
CITY PROJIDENCE	State PI	02906	PAWTUCKET	State RI	^{∑क} 02 6 €
Secretary Name CHRISTOPHER NUZUM			Treasurer Name GREGORY LLOYD		
Street Address 101 LOWDEN ST			Street Address 446 MORRIS AVE		
City PAWTUCKET	State P.I	02860	CITY PROJUDENCE	State	^{zip} 02906
Director Name	OF THE DIRECTOR	S: ("X" BOX FOR ATT	Director Name		
GIEGORY LLOYD			STEVEN WEINSTEIN		
446 MORICIS AUE			96 CHUNCHILL AVE		
City PROVIDENCE	State Pt	^{zip} 02906	PALO ALTO	State	94306
Director Name THO LNE	SPAREMA	N	Director Name		
Street Address SLATEN CD			Street Address	······································	
CID POLIDENCE	State -	²⁴ 07.503	City	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
my ' i s i o overontla	of record in the Off	ice of the Secretary of	Number of Shares	Class/Series	Par Value
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.			757,793	common	0,01
			778,594	pref	10,01
This report must be executed this report must be executed	on behalf of the cor	poration by an authorize	ed representative. If the corpor or trustee.	oration is in the hands	of a receiver or trustee,

File Date	LED
Charle No. F.	A
Check No.	23 AUS
Ву: Ву/	3015
FOR SE	CRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affi	rm that I have examined this report,
including any accompanying schedules and contained herein are true	d statements, and that all statements
MANUEL	2/23/2009
Signature	Date
engon T. Lu	H)
Print or Type Name P(ESIDENT	
Title	Form 630 Rev. 08/08