

A. Ralph Mollis, Secretary of State

Corporations Division 148 W. River Street

Providence, RI 02904-2615

## 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

401.222.3040

1. Corporate ID No.	2. Name of Con	ng Fee: \$50.00* • THIS RE paration failing or refusing to file it	<del></del>	in the time prescribed by t	aw (R.I.G.L. 7-1.2-1501(&
115195	DAVI	5. State of Incorporation	200		<del></del>
3. Street Address Principal Busin	ress Office	3 C. 3C4110	CAL ENGINE	EFRING D	VC.
466 POND 4. Business Phone No.	.72		WAVEGE	State	Zip
401-787	3-222	5. State of Incorporation	m		0287
4. Business Phone No.  401 - 78  6. Brief Description of the Chara	cter of Business Condu	cted in Physica telement	E ISLANI	7	
7. NAMES AND ADDRESS President Name	SES OF THE OFFI	CERS: ("X" BOX FOR AT	TACHMENT) [7] total re-	. CD . c	
DAU A			Vice President Name	SPACES BEFORE USING	ATTACHMENTS
Street Address 466 POND ST  City  WAKEFIELD RI 02879  Secretary Name			NONG		
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City .	State	Zip			
Secretary Name	JRJ	02879	City	State	Ζψ
DAVID	<		Treasurer Name		
DAVIDE Street Address	SEYMOC	11	· ·	SAM	
466 POND ST.			DAVID E. SEIMOUR		
City State Zip			466 POND ST.  City  WAKEFIELD  State  O2879  ITTACHMENT)  FILL IN SPACES BEFORE USING ATTACHMENTS		
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VONE			Director Name		
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y			Street Address		
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SHARES AUTHORIZED	Ī			State	Zip
			10. SHARES ISSUED	("X" BOX FOR ATTACHM	  ENT\ □
nis information is currently	of record in the	200	THIS SEC	TION MUST BE COMPLETED	
nis information is currently of record in the Office of the Secretary of ate. Changes require an additional filing. See Section 9 of			Number of Shares	Class/Series	Par Value
struction sheet.			8,000	Commission	
_			7	COMMON	,01
s report must be executed	On hab-le a :		<u></u>		
report must be executed of	on behalf of the co	orporation by an authorized	representative. If the cor	poration is in the bands of	_ <u></u>
	410 00	epotation by the receiver o	r trustee.		a receiver or trustee,
			Under penalty of parincluding	party, I declare and affirm that i	have examined this repo
Data FILED			contained herein are	pary, I declare and affirm that it panying schedules and statement true and correct	ents, and that all statemen
Data - The last Lat		-			0 - /
		1	Signature	2/	<u> </u>
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	<u>)</u>		Print or Type Name	Stymour	Date -
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