

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 2007 401.222.30.

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(e&d)) is relieve to a smaller for a \$25.00.

subject to a penalty fee of \$25.00.					
1. Corporate 1D No. 2. Name of Corporation \$ 36 01		CURPORATION			
3. Street Audress Principal Business Office 34 ENGLE HARD AVENUE		CINAVENEL	State NJ	7.1p 0704/	
1. Answers Phone No. 5 State of Incorporation New To					
6. Brief Description of the Character of SALE + D, ST	f Business Conducted in R ス, B いんしん	thode Island OF LOOFIN	VG SUPPLIES		
7. NAMES AND ADDRESSES	OF THE OFFICERS:	("X" BOX FOR ATTA	CHMENT) 🗍 FILL IN SPA	CES BEFORE USING A	TTACHMENTS
President Name BRAD SEGAL			Vice President Name JOSEPH STACY		
Street Address 76 ROCKLEDGE OR.			Street Address 4 HIGHFIELD LANE		
City IN 6572N	State NJ	07039	COLTY NECK	State NJ	21p 37722
Secretary Name MICHOEL L WEINBERGER			Treasurer Name		
Street Address 6 ARROW DR.			Street Address		
CHYNESTON	State	Zip 0 7 0 3 9	СПу	State	Zip
8. NAMES AND ADDRESSES	OF THE DIRECTOR	S: ("X" BOX FOR ATT	ACHMENT) [FILL IN SP	ACES BEFORE USING	ATTACHMENTS
BRAD SEGAL			Director Name		
Street Address 76 RUCKLEDGE DR.			Street Address		
LIVINGSTUN	State NJ	07039	City	State	Zip '
Director Name		Director Name			
Street Address			Street Address		
City	State	Zip	СПу	State	Zip
9. SHARES AUTHORIZED 40,000 000			10. SHARES ISSUED ("X" BOX FOR ATVACHMENT) ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
			Number of Shares	Class/Series	Par Vaiue
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.			4,256,912	STOCK	. 001
			50 - 1. (1204)		
This report must be executed this report must be executed or	•	-		oration is in the hands	of a receiver or trustee,
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
				•	at I have examined this report
					ements, and that all statement
2 /	19		contained herein are tr	ue and correct.	2/ /.6
File Date 3-2	-01	ľ	Greth 7	المحاصة	2/26/09
Check No. 562762			Signature Date ANNETTE RUSSO		
Bv. MMC			Print or Type Name		
FOR SECRETARY OF STA	TE USE ONLY		Title	C	
			1 1116		Form 630 Day, (19/09