

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street Providence, RI 02904-2615 401.222.3040

2009

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2009 401.22230
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(cod)) is

subject to a printity jee of \$2510					
298364	2. Name of Corporation /// // // // // // // // // // // // /	on Wests Corporate	in lyque Works	12C	
3. Street Address Principal Bus	sex. William	s Avenux	Eny Punfird	State RI	12916
4 Business Phone No.	3-4894	5. State of Incorporation	KI		(
6. Brief Description of the Char	racter of Business Conducted in Att NHY	1 Rhode Island			
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTA President Name			CHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Vice President Name		
Street Address			: Street Address		
115 1	Kon William	AMMUL		Leur	
City Clurry for A.	State CI	210 02916	City	State	<i>Ζ</i> ‡ρ
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. NAMES AND ADDRE Director Name	SSES OF THE DIRECTO	DRS: ("X" BOX FOR AT	CACHMENT) TILL IN SPA	ACES BEFORE USING	ATTACHMENTS
Street Address			Street Address		
City	State	Zip	City	State	Zψ
Director Name			Director Name		
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		
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.			Number of Shares	Class/Series	Par Value
			none		
	cuted on behalf of the co	rporation to be receiver	ed representative. If the corpor or trustee.	ration is in the hands	of a receiver or trustee,
	1	ell ED			
<u> </u>	•	MAR 17 2009			nat I have examined this report
<u> </u>		MAR	contained herein are tru		ements, and that all statement
File Date E7 :Z	ACT PAR PROS	1111113	Signature Signature	Mikander	2-17-07 Date
Check No	gratikas irriiti B i	12.2	Alica J	Alexanter	
By: 3171		- 1 02909 -	Print or Type Name		
FOR SECRETARY	OF STATE USE ONLY	1 1000	Title Title		