



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

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

1995

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 subject to a penalty fee of \$25.00.

1. Corporate ID No 000506090		2. Name of Corporation ASCO Services, Inc	
3. Street Address Principal Business Office 50-60 Hanover Road		City Florham Park	State New Jersey
4. Business Phone No. 973 966-2469		5. State of Incorporation New Jersey	
6. Brief Description of the Character of Business Conducted in Rhode Island			
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name Armand J. Visoli		Vice President Name David C Moon	
Street Address 50-60 Hanover Road		Street Address 8000 W Florissant Ave	
City Florham Park	State NJ	City St Louis	State MO
Zip 07932		Zip 63136	
Secretary Name Christopher G. Walsh		Treasurer Name Eamon Rowan	
Street Address 50-60 Hanover Road		Street Address 50-60 Hanover Road	
City Florham Park	State NJ	City Florham Park	State NJ
Zip 07932		Zip 07932	
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS			
Director Name E.K. Feeney		Director Name Armand J. Visoli	
Street Address 8000 W Florissant Ave		Street Address 50-60 Hanover Road	
City St Louis	State MO	City Florham Park	State NJ
Zip 63136		Zip 07932	
Director Name Eamon Rowan		Director Name "None"	
Street Address 50-60 Hanover Road		Street Address	
City Florham Park	State NJ	City	State
Zip 07932		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 100	Class/Series CNP
		Par Value \$0.00	

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.

FILED

File Date JUL 15 2009

Check No. By 014631

By: _____

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 statements contained herein are true and correct.

Signature Christopher G Walsh Date 7/7/09

Print or Type Name Secretary

RECEIVED