

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. 7-1.2-1501(ec/d)) is subject to a penalty fee of \$25.00.

1. Corporate II) No. 120958	Nine Hundred Ninety Five Corporation				
3. Street Address Principal Business Office 81 Troy Street		Providence	State RI	2ιρ 02909	
4. Business Phone No. 5. State of Incorporation Rhode Island					
6. Brief Description of the Character Building Materials	of Business Conducted in 1	Rhode Island			
7. NAMES AND ADDRESSES	OF THE OFFICERS	: ("X" BOX FOR ATTA		SPACES BEFORE USING	G ATTACHMENTS
President Name Louis S. Gautieri, Jr.			Vice President Name Janet Lee Gautieri		
Street Address			: Street Address		
81 Troy Street			81 Troy Street		
Сіці Providence	State RI	^{Zip} 02909	City Providence	State RI	^{Zip} 02909
Secretary Name Janet Lee Gautieri			Treasurer Name Louis S. Gautieri, Jr.		
Street Address 81 Troy Street			Street Address 81 Troy Street		
City Providence	State RI	^{Zip} 02909	City Providence	State RI	<i>⊠</i> p 02909
8. NAMES AND ADDRESSES	OF THE DIRECTOR	RS: ("X" BOX FOR ATT	ACHMENT) 🗍 FILL I	N SPACES BEFORE USI	NG ATTACHMENTS
Director Name Louis S. Gautieri, Jr.			Director Name		N. A
Street Address			Street Address		3 7
81 Troy Street	T	·· L			
Providence	State RI	02909	City	State	Zip 55
Director Name	.J.!N		Director Name		
Street Address			Street Address		3 3 6
City	State	Zip	City	State	2 5 N
9. SHARES AUTHORIZED	t	I	: 10. SHARES ISSUEI	 C'X" BOX FOR ATTAG	- $ -$
			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
			1000		None
				:	
This report must be executed	on behalf of the cor	poration by an authorize	d representative. If the	corporation is in the han	ds of a receiver or trustee,
this report must be executed	on behalf of the corp	poration by the receiver	or trustee.	•	
		FILED			
		FILED			
		AUG 25 2009	including any acc	companying schedules and s	n that I have examined this repostatements, and that all stateme
	1	BV	contained herein	are true and correct.	w/ / -
File Date			Signature	Suutr	2/11/08
Check No.		1294974			Date
			Louis S. Ga		
Ву:		_	Print or Type Nan	ne	
FOR SECRETARY OF ST	ATE USE ONLY		President		
		1	Title		