

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 200 401.222.30.

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(cbd)) is subject to a penalty fee of \$25.00. 1. Carpurate ID No A. P.L. HEALTU CO- INC.

70 -		12 / 1/ 00-	110		
3. Street Address Principal Busin 745 NooSEN:	76.77	Bo!	W. GREENWICK	1 Siate RZ	02817
4. Business Phone No. 401 397 9	360	5. State of Incorporation			
6. Brief Description of the Chara	cter of Business Conducted i	n Rhode Island			
	SES OF THE OFFICER	S: ("X" BOX FOR ATTA	CHMENT) [] FILL IN SP.	ACES BEFORE USING AT	TACHMENTS
President Same			Vice President Name  CRACK BARTLETT		
145 NODSENECK Hill BD.			Street Address NOUS ENECK HILL NO-		
W. GREEN WICK	State R. J.	202817	W. GREENEVEL	State State	82817
Secretary Name CEBILL			Treasurer Name		
Street Address Pol 7	BD.		Street Address		
MODNICK	State R. I.	21pO2888	City	State	Zip
	SES OF THE DIRECTO	ORS: ("X" BOX FOR ATT	ACHMENT)   FILL IN S	SPACES BEFORE USING A	TTACHMENTS
Director Name			Director Name		~ 10
Stract Address			Street Address		SECO
City	State	Zq	City	State	
Director Name			Director Name		
Street Address			Street Address		ED ST.
City	State	Zip	City	State	
9. SHARES AUTHORIZE	D	ŧ	: 10. SHARES ISSUED ( ISSUED SHARES — THIS SECT	"X" BOX FOR ATTACHM.	ENT)
This information is currently of record in the Office of the Secretary of			Number of Shares	Class/Series	Par Value
State. Changes require an additional filing. See Section 9 of instruction sheet.			100	Common	No Pan
			ed representative. If the con	poration is in the hands of	a receiver or trustee,
this report must be execu	ited on behalf of the co	orporation by the receiver	or trustee.		
		FILED			
			Under penalty of per including any accom	jury, I declare and affirm that panying schedules and staten	I have examined this report tents, and that all statement
		JAN 21 2010	contained herein are		1/10/11
File Date		By	Sicharure O	CKOK-OME	Date
Check No.		100,000	HENRU	LA PlanE	/
Ву:		P 7-1 US 778	Print or Pope Name	Maril 1 to 1 1 to 1	
FOR SECRETARY C	OF STATE USE ONLY		Title Title		
					Form 630 Rev. 08/08