

FOR SECRETARY OF STATE USE ONLY

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 2010

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(ecd.)) is subject to a penalty fee of \$25.00.

| 1. Corporate ID No. | 2. Name of Corporati | POPATE C | HARTERS 3 | WC | |
|--|--------------------------|----------------------------|--|--------------------------|--------------------------------|
| 1. Corporate IP No. 16 4 1 9 9 3. Street Address Principal Business (40 Scott LATUAM 4. Business Phone No. 1401) 182-1341 | Office 1/7 C | | City 1 | State R T | 02879 |
| 10 Scott LATHAM 4 Rusiness Phone No. | 11 1 342 | 5. State of Incorporation | WAKEFIEZA | 1 7, | 02077 |
| 401) 182-1361 | | RHODE | ISLAND | | |
| . Brief Description of the Character | of Business Conducted is | n Rbode Island | | | |
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| . NAMES AND ADDRESSES | OF THE OFFICER | IS: ("X" BOX FOR ATTA | CHMENT) FILL IN SP! Vice President Name | ACES BEFORE USING | ATTACHMENTS |
| resident Name SCOTT | LATITAM | | NOH O | ·- | |
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| Street Address | | | Street Address | | |
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| - y | State | 2.10 | :, | | , |
| . NAMES AND ADDRESSES | OF THE DIRECTO | DRS: ("X" BOX FOR ATT | ACHMENT) FILL IN S | paces before usin | NG ATTACHMENTS |
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| No No | | | Street Address | | |
| ou chares | | • | | | ` |
| ţv | State | Zip | Ctty | State | Zψ |
| irector Name | | J | Director Name | | |
| Street Address | | | Street Address | | |
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| SHARES AUTHORIZED | • | • | 10. SHARES ISSUED (| "X" BOX FOR ATTAC | HMBNT) 🔲 |
| | 200 | | ISSUED SHARES — THIS SECTION MUST BE COMPLETED | | |
| 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 | | | NoHer | ļ | |
| nstruction sheet. | | | - A 0/1 C | | |
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| his report must be executed | on behalf of the or | repression by an authorize | d range entative If the com | poretion is in the hear | de of a receiver or tructed |
| his report must be executed | | | | polation is in the dance | an of a location of malan |
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| N. Committee | | | | | |
| | | | Under penalty of peri | uv. I declare and affirm | that I have examined this re |
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| FIL | | | contained herein and | mue anti forceci | |
| Tile Date |) 0-2010 - | | (\mathbf{X}) /\(\alpha\) | 11/199 | 1/19/ |
| • | 22 2010 | | Signature ! | 7 7 7 | Date |
| Check No. Bv | 1273 | · | Scott 1 | LATHAM | |
| | JOCH | | Print or Type Name | | |
| Ву: | | · | - On 50 5 | 3 / 4 | |

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