

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

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1. Corporale ID No. 149604		2. Name of Corporation Star Cleaning, Inc.				
3. Street Address Principal Business Office 84 City View Avenue			City East Providence	State RI	<i>Zip</i> 02914	
		5. State of Incorporation Rhode Island		· <u> </u>		
6 Brief Description of the Ch To provide general cl	paracter of Business Conduc eaning services	ted in Rhode Island		·		
7. NAMES AND ADDR	ESSES OF THE OFFI	CERS: ("X" BOX FOR AT	TACHMENT) [FILL IN SI	PACES BEFORE USING	G ATTACHMENTS	
President Name Felipe Vieira			Vice President Name Michael Vieira			
Street Address 352 Cole Street			Street Address 84 City View Avenue			
city Seekonk	State MA	^{Zip} 02771	City East Providence	State RI	<i>Zip</i> 02914	
Secretary Name Felipe Vieira			Treasurer Name Michael Vieira			
Street Address 352 Cole Street			Street Address 84 City View Avenue			
ciiy Seekonk	State MA	^{Zip} 02771	Ctty East Providence	State RI	^{Zip} 02914	
8. NAMES AND ADDR	ESSES OF THE DIRE	CTORS: ("X" BOX FOR A	TTACHMENT) [FILL IN .	SPACES BEFORE USI	NG ATTACHMENTS	
Director Name N/A			Director Name	alan ke sa kanganda dalah kenara 1967 te diandah sebagai ke bada 22 dalah 1979 da	in the second of the second	
Street Address			Street Address			
City	State	Zip	City	Siate	Zip	
Director Name			Director Name			
Street Address			Street Address			
City	State	Ztp	City	State	Zip	
). SHARES AUTHORIZ	BD		10. SHARES ISSUED (
This information is cur	rently of record in the	e Office of the Secretary of		Class/Series	Par Value	
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.			100	common	no par	
			THIS SECTION WUST BE CO.			
This report must be executive report must be executed as	cuted on behalf of the	e corporation by an authori- corporation by the receive	zed representative. If the cor	poration is in the hand	ls of a receiver or trustee,	
Topott must be exec	Dated on Denait of the	corporation by the receive.	i or ausice,			

File Date 25/8-20/0 Check No. 2304 By: 250 SECRETARY OF STATE USE ONLY	2/18/2010 1364 mnc	Under penalty of perjury, I declare and affirm the including any accompanying schedules and state contained herein are true and correct. Signature Michael Vieira Print or Type Name Vice President
FOR SECRETARY OF STATE USE UNLI		Title

Form 630 Rev. 08/08