

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 401.322.30
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(e)d) is

subject to a penalty fee of \$25.00.	Alrelson	V I OGN Dofo	HON IN			
1. Corporate ID No						
147669	NATASEM R	Swaltuice on a	T10C	State	Zip	
3. Street Address Principal Business O		<	SMITHTIEH	State R.I	02917	
4. Business Phone No. 44 - 349 - 5000 5. State of Incorporation						
401-249-500	1-3000					
6. Brief Description of the Character of	f Business Conducted in 1	thode Island	/ 1 / 2	. •		
To Provide All Frem	s of Mortan	6 JULY 10 70 7	the Redic 1 Busin			
/. NAMES AND ADDRESSES	OF THE OFFICERS:	"X" BOX FOR ATTA	CHMENT) [THEE IN STA	CES BEFORE USING AT	TACHMENTS	
President Name			: Vice President Name : None			
Kichned R Zelano			* 1			
Street Address			Street Address			
116 asvernors DR	State	Zip	: Cily	State	Zip	
FANT COMMON	State RI	02818	1			
Secretary Name	1	1	Treasurer Name	1	.	
None			None			
Street Address			Street Address			
			<u>:</u>		25	
City	State	Zip	City	State	32p 33 n	
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8. NAMES AND ADDRESSES	OF THE DIRECTOR	RS: ("X" BOX FOR ATT		PACES BEFORE USING	ARVACHMENTS	
Director Name			Director Name			
_Now			Street Address			
Street Address			Street Address R S S S			
City	State	Zip	City	State	No ST	
2009	Service .	1			F. ~ H	
Director Name	. J		Director Name			
ands			Nove			
Street Address			Street Address			
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Спу	State	Zip	City	State	Zip	
	1	1		### DAY 50 - 100 -		
9. SHARES AUTHORIZED (000			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT)			
			ISSUED SHARES THIS SECTION MUST BE COMPLETED Number of Shares Class/Series Par Value			
This information is currently	of record in the Of	fice of the Secretary of	Number of Shares	Class/Series	rur value	
State. Changes require an additional filing. See Section 9 of instruction sheet.			100	Common		
			100	17400	- 	
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This report must be executed	Lon behalf of the co	rooration by an authoriz	ed representative. If the cor	poration is in the hands	of a receiver or trustee	
this report must be executed	on behalf of the cor	poration by the receiver	or trustee.	F		
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19.02 B			Under panelty of see	ium I declare and officer th	at I have examined this repo	
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