



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

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 2011

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

1. Corporate ID No. 85057		2. Name of Corporation Supreme Corp.			
3. Street Address Principal Business Office 410 Ella Grasso Boulevard			City New Haven	State CT	Zip 06519
4. Business Phone No. 203-624-9915		5. State of Incorporation Connecticut			
6. Brief Description of the Character of Business Conducted in Rhode Island Leasing of storage trailers and containers					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Bennett Lebov			Vice President Name George Lebov		
Street Address 410 Ella Grasso Boulevard			Street Address 410 Ella Grasso Boulevard		
City New Haven	State CT	Zip 06519	City New Haven	State CT	Zip 06519
Secretary Name Philip Lebov			Treasurer Name Bennett Lebov		
Street Address 410 Ella Grasso Boulevard			Street Address 410 Ella Grasso Boulevard		
City New Haven	State CT	Zip 06519	City New Haven	State CT	Zip 06519
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Bennett Lebov			Director Name George Lebov		
Street Address 410 Ella Grasso Boulevard			Street Address 410 Ella Grasso Boulevard		
City New Haven	State CT	Zip 06519	City New Haven	State CT	Zip 06519
Director Name Philip Lebov			Director Name		
Street Address 410 Ella Grasso Boulevard			Street Address		
City New Haven	State CT	Zip 06519	City	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
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.			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
			Number of Shares 500	Class/Series Common	Par Value \$100
			THIS SECTION MUST BE COMPLETED		

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

FILED

MAR 11 2011

File Date	BY
Check No.	
By:	
FOR SECRETARY OF STATE USE ONLY	

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature: Bennett Lebov Date: 3/2/11
Print or Type Name: Bennett Lebov
Title: President