

Filing fee: \$15.00

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations
OFFICE OF THE SECRETARY OF STATE

39778 Annual Report for the year 1984

FIRST: The name of the corporation is
ASCIOLLA & SONS DENTAL LAB, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is dental laboratory

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island
c/o Anthony B. Sciarretta, 915 Smith Street, Providence, RI 02908

SIXTH: Names and addresses of its directors and officers:

(Addresses must include street and number, if any)

Name	Office	Address
	Director	
	Director	
	Director	
Salvatore Ascioilla	President	74 Brush Hill Road, Prov., RI
Salvatore Ascioilla	Vice President	Same
JOHN N. ASCIOLLA		
Salvatore Ascioilla	Secretary	Same
XXXXXXXXXXXXXXXXXXXX		
JOHN N. ASCIOLLA		
Salvatore Ascioilla	Treasurer	Same

(If additional space is needed, attach rider)

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
300	Common		Without par value

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	Common		Without par value

Dated: March 1, 19 84 ASCIOLLA & SONS DENTAL LAB, INC.

(Name of Corporation)

By *Salvatore Ascioilla*

Title President

(Report must be signed by an officer)

If the corporation has changed its registered office and/or its registered agent, Form #9 must be filed. Please contact Corporation Division for information. 277-3040

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