

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 2007
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 t

subject to a penalty fee of	\$25.00.			mys upier use time preserioea by to	uw (R.I.G.L. 7-1.2-1501(c&d)) is	
1. Corporate ID No.	2. Name of Corp.	oration	_			
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3. Street Address Principa	l Business Office	731	City	State	Zip	
So Reser	1167 AYE		Johnston	RI	02919	
4. Business Phone No.	-015	5. State of Incorporation				
401-764-	0367	KI				
6. Brief Description of the	Character of Business Conduc	ted in Rhode Island				
Lawn te	Ailisa Tim 1	- Pesticiale Se	W1662			
7. NAMES AND ADI	DRESSES OF THE OFFIC	CERS: ("X" BOX FOR ATTA	(<i>CHMENT</i>) 🗌 FILL IN	SPACES BEFORE USING	ATTACHMENTS	
3			Vice President Name			
Michael McCool			Diana McCool			
Street Address			Street Address			
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City	State	Zip	Gly	State	Zip	
Johnston	RI	102919	Johnston	RI	02919	
Secretary Name	_		Treasurer Name			
Same as Above			59m/ 6	5 ALONE		
Street Address			Street Address			
City	State	Zip	City	State	Zip	
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8. NAMES AND ADI	PRESSES OF THE DIREC	CTORS: ("X" BOX FOR AT	TACHMENT) [] FILL I	I N SPACES BEFORE USIN	G ATTACHMENTS	
Director Name			Director Name	THE POLICE STATE	O ATTACHMENTS	
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Street Address			Street Address			
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				J.W.L		
Director Name	*******************************		Director Name		 	
Street Address			Street Address			
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City	State	Zip	City	State	Zip Z	
					1 1 3 GHz	
9. SHARES AUTHOR	HZED	ı	: 10. SHARES ISSUED	 <i>("X" BOX FOR ATTACE</i>		
				ECTION MUST BE COMPLETED		
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This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of				Crass series	Par Value	
instruction sheet.			0			
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this report must be e	vaccused on behalf of the	corporation by an authorize corporation by the receiver	a representative. If the	corporation is in the hands	s of a receiver or trustee,	
ans report must be c.	Accured on ochan of the	corporation by the receiver	or trustee.			
			Under penalty of	periury. I declare and affirm t	hat I have examined this repo	
		 -1	including any acc	ompanying schedules and sta	tements, and that all statement	
-			contained herein a	be true and correct.	i i i i i i i i i i i i i i i i i i i	
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