

2. Name of Corporation PRE-AMBLE, Inc.

1. Corporate ID No. 21599

4. Business Phone No. (401)742-4542

3. Street Address Principal Business Office 40 Gilbert Stuart Drive

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street Providence, RI 02904-2615

<sup>Zip</sup> 02818

State Rhode Island

401.222.3040

## PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2012

5. State of Incorporation Rhode Island

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

City East Greenwich

| 6. Brief Description of the Character<br>Management and rental of  | r of Business Conducted in<br>real property. | Rhode Island             |  |  |                            |
|--|--|--------------------------|--|--|----------------------------|
| 7. NAMES AND ADDRESSES President Name Fred Luchesi, Jr.  | S OF THE OFFICERS                            | : ("X" BOX FOR ATTA      | CHMENT)  FILL IN SF<br>· Vice President Name<br>Robert Dickson | PACES BEFORE USING A   | TTACHMENTS                 |
| Street Address 40 Gilbert Stuart Drive   |  |                          | Street Address 40 Gilbert Stuart Drive                         |  |                            |
| City<br>East Greenwich   | State<br>Rhode Island                        | <sup>Ζip</sup><br>02818  | City<br>East Greenwich   | State<br>Rhode Island  | <sup>Ζip</sup><br>02818    |
| Secretary Name Fred Luchesi, Jr.   |  |                          | Treasurer Name Fred Luchesi, Jr.                               |  |                            |
| Street Address 40 Gilbert Stuart Drive   |  |                          | Street Address 40 Gilbert Stuart Drive                         |  |                            |
| City<br>East Greenwich   | State<br>Rhode Island                        | <sup>Zip</sup><br>02818  | City<br>East Greenwich   | State<br>Rhode Island  | <sup>Zip</sup> 02818       |
| 8. NAMES AND ADDRESSE: Director Name   | S OF THE DIRECTO                             | RS: ("X" BOX FOR ATT     | ACHMENT)  FILL IN : Director Name                              | SPACES BEFORE USING  | ATTACHMENTS                |
| Street Address   |  |                          | Street Address   |  |                            |
| City   | State  | Zip                      | City   | State  | Zip                        |
| Director Name  | Į.   | I                        | Director Name  | ı  | 1                          |
| Street Address   |  |                          | Street Address   |  |                            |
| City   | State  | Zip                      | City   | State  | Zip 📚                      |
| 9. SHARES AUTHORIZED   | l  | 1                        | 10. SHARES ISSUED (  | <br><i>("X" BOX FOR ATTACH!</i><br>fion <u>must</u> be completed | MENT)                      |
| 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. |  |                          | Number of Shares   | Class/Series   | Pag Value                  |
|  |  |                          | 600  | Common   | NO PAR S                   |
|  |  |                          |  |  | ED<br>STA<br>S DIA<br>P: 3 |
| This report must be executed this report must be executed  |  | poration by the receiver | or trustee.  |  |                            |
| File Date  | · · · · · · · · · · · · · · · · · · ·        | JAN 2 BY                 | including any accommodate contained herein are                 | Luchus;  |                            |
| Ву:  |  |                          | Print or Type Name President                                   |  |                            |
| FOR SECRETARY OF STATE USE ONLY  |  |                          | Title  |  | F (10 B 0000               |
|  |  |                          |  |  | Form 630 Rev. 08/08        |