

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State - Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2012

Filing Period: January 1 - March 1 · This report must be typed or printed legibly.

1. Entity ID No. 15895		ne of the Corporation ENBAUM & KIRSI	rneys at Law, In	C.											
3. Principal office address 888 Reservoir Avenue	······································		City Cranston	State RI	Zip 02910										
4. Business Phone No. (401) 946-3200			5. State of Incorporation Rhode Island												
6. Brief description of the char- Practice of Law	acter of business	conducted in Rhode Island	i												
7. LIST ALL OFFICERS (NAI	MES AND ADDR	ESSES) ("X" BOX FOR A	TTACHMENT)												
President Name Christopher L. Russo			Vice-President Name Jason D. Monzack												
Street Address 60 McPartland Way			Street Address 115 Varnum Drive												
City East Greenwich	State RI	Zip 02818-1151	City East Greenwich	State RI	Zip 02818										
Secretary Name Robyn K. Factor			Treasurer Name Christopher L. Russo												
Street Address 165 Council Rock Roa	ad		Street Address 60 McPartland Way												
City Cranston	State RI	Zip 02921	City East Greenwich	State RI	Zip 02818-115 1										
8. LIST ALL DIRECTORS (N)	MES AND ADD	RESSES) ("X" BOX FOR	ATTACHMENT)												
Director Name Christopher L. Russo	The second secon		Director Name Jason D. Monza	ack											
Street Address 60 McPartland Way			Street Address 115 Varnum Dri	ve											
City East Greenwich	State RI	Zip 02818-1151	City East Greenwich	State RI	Zip • 02818										
Director Name Robyn K. Factor			Director Name												
Street Address 165 Council Rock Roa	nd		Street Address												
City Cranston	State RI	Zìp 02921	City	State	Zip										
. SHARES AUTHORIZED			10. SHARES ISSUED	("X" BOX FOR ATTACH	IMENT)										
A STATE OF THE PROPERTY OF THE			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE										
This information is currently of State. Changes require an See Section 9 of instruction :	additional filing		833	Common/A	None										
This report must be executed		corporation by an authorize st be executed on behalf of	•	,	s of a receiver or trustee										

																								22	
					2.1																				
	С																								
			C																						

																								. ::	
										7															
									77					35			,,,,								
**															10										
							444						**												
																		÷							

this report, including any accompanying schedules and statements, and that all statements contained berein are true and correct.

Signature of Authorized Representative

Date

Christopher L. Russo, President

Print or Type Name of Authorized Representative

Form No. 630 · Revised: 01/2012