

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

Filing Fee: \$50,00 · FAILURE TO FILE THIS REPORT BY N	MARCH 31 WILL RESU	JLT IN A \$25.00 PENA	LTY FEE.
Entity ID No. Z. Exact name of the Corporation			
	21:11	<i>a</i> ,	
18347 Windson	Polishin	a Co. Frci	
3. Principal office address	CITY	State 7	_ Zip
1/ trydence Ave	Provide	ence /	- 02909
H. A. I. W. I. 1. 19 19	5. State of Incorporation	Tolon	2
6. Brief description of the character of business conducted in Rhode Island	1 MO ar	1-4-5/a. M.	<u>د</u>
The state of the s	0		
Poliching and Guand	'un of To	we leav	
7. LIST ALL CONCERN WAMES AND ADDRESSES) ("X" BOX FOR A	TTACHMENT)		syntheticani per
President Name	Vice-President Name	. 0	<i>i</i> 1 ·
John telosi	Joseph	une tel	091
Street Address	Street Address	<i>u</i> .	
SI LODKOUI /IVE	81200	KOUP AV	r e
Johnston RI O2919	The state of	State	Zip 791 Q
Secretary Name	Treasurer Name		10211 9
Tonhus Relaci	John Po	1051	
Street Address	Street Address	4 1	
87 hookout Avei	87 hork	Coul AVE	
City Zip Zip	City 1. 1	State >	12919
JOHNS 104 14 02919	Johnste	$n \mid K \perp$	02111
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR A	Director Name	Republicanie vojoj kolekto i erabet.	<u> 1996 (1997 - 1997) de la central de la ce</u>
Tahu Palasi	Tostoh	in Pelos	~ i
Street Address	Street Address	1000 19-100	,
87 LOOKOUT AVG	87 40	okout "	AVE
City State Zip	City	State	Zip
Johnston RL 02919	Johnslo	nKt	7919
Director Name	Director Name		
Street Address	Street Address		
87 hookout Ave	335111347335		
City State / Zip	City	State	Zip
Johnston KL 02919			
9. SHARES AUTHORIZED	10. SHARES ISSUED ("X" BOX FOR ATTACH	
	NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing.	300	Common	No Par Value
See Section 9 of instruction sheet.			1 to 1 Value
	<u>L</u>		
This report must be executed on behalf of the corporation by an authorized this report must be executed on behalf of the corporation by an authorized this report must be executed on behalf of the corporation by an authorized this report must be executed on behalf of the corporation by an authorized this report must be executed on behalf of the corporation by an authorized this report must be executed on behalf of the corporation by an authorized this report must be executed on behalf of the corporation by an authorized this report must be executed on behalf of the corporation by an authorized this report must be executed on behalf of the corporation by an authorized this report must be executed on behalf of the corporation by an authorized this report must be executed on behalf of the corporation by an authorized this report must be executed by the corporation behalf of the corporation by the corporation behalf of			of a receiver or trustee,
tria report must be executed on benait or t	are surporunon by the rec		

File Date	
Check No	FILED
Ву:	
FOR SECRETARY OF ST	ATE USE ONLY FEB 2 7 2014
Form No. 630 America (2012	· 14451

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.