



STATE OF RHODE ISLAND  
AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State

James R. Langevin, Secretary of State  
Corporations Division  
100 North Main Street, Providence, RI 02903-1335  
401-277-3040

**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1998**  
Filing Period: January 1-March 1 • Filing Fee: \$50.00



(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **34295** 2. Name of Corporation **PREFERRED INVESTMENT EXCHANGE, INC.**  
3. Street Address Principal Business Office City State Zip  
**735 Branch Avenue - P.O. Box 6166 Providence RI 02940**  
4. Business Phone No. 861-5045 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **02940**

7. Brief Description of the Character of Business Conducted in Rhode Island

**Mergers, acquisitions and related consulting activities**  
8. NAMES AND ADDRESSES OF THE OFFICERS (\*X\* BOX FOR ATTACHMENT)

President Name	Richard A. Cocca	Vice President Name	None
Street Address	735 Branch Avenue	Street Address	
City State Zip	Providence RI 02904	City State Zip	
Secretary Name	Richard A. Cocca	Treasurer Name	Richard A. Cocca
Street Address	735 Branch Avenue	Street Address	735 Branch Avenue
City State Zip	Providence RI 02904	City State Zip	Providence RI 02904

9. NAMES AND ADDRESSES OF THE DIRECTORS (\*X\* BOX FOR ATTACHMENT)

Director Name	Richard A. Cocca	Director Name	
Street Address	735 Branch Avenue	Street Address	
City State Zip	Providence RI 02904	City State Zip	
Director Name		Director Name	
Street Address		Street Address	
City State Zip		City State Zip	

10. SHARES AUTHORIZED (\*X\* BOX FOR ATTACHMENT)

AUTHORIZED SHARES	Number of Shares	Class/Series	Par Value
	<b>100 SHS COMM NO PAR VALUE</b>		

11. SHARES ISSUED (\*X\* BOX FOR ATTACHMENT)

ISSUED SHARES	Number of Shares	Class/Series	Par Value
	<b>10</b>	<b>Common</b>	<b>None</b>

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



\* 3 4 2 9 5 \*

File Date: 2-27-98  
Check No.: 13604  
By: ICP

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.

Richard A. Cocca 2/19/98  
Signature of Officer Date  
Richard A. Cocca  
Print or Type Name of Officer  
President  
Title of Officer

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