



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Matthew A. Brown, Secretary of State

Corporations Division
100 North Main Street
Providence, RI 02903-1335
(01.222.3040)

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 51900		2. Name of Corporation ALL THE ANSWERS, INC.			
3. Street Address Principal Business Office Summit East-Suite 330, 300 Centerville Road			City Warwick	State RI	Zip 02886
4. Business Phone No. (401) 737-7200		5. State of Incorporation RHODE ISLAND		6. SIC Code 6882	
7. Brief Description of the Character of Business Conducted in Rhode Island TO BUY AND SELL MAILING SERVICES, WORD PROCESSING SERVICES, TRANSCRIPTION SERVICES AND RESUME SERVICES					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Paul A. Sasso			Vice President Name Tamara Sasso		
Street Address 50 Alhambra Road			Street Address 50 Alhambra Road		
City Warwick	State RI	Zip 02886	City Warwick	State RI	Zip 02886
Secretary Name Paul A. Sasso			Treasurer Name Tamara Sasso		
Street Address same			Street Address same		
City	State	Zip	City	State	Zip
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class Series	Par Value	Number of Shares	Class Series	Par Value
200 NO PAR VALUE			200	Common	No Par

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



51900

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.

Paul A. Sasso 3-9-05
Signature of Officer Date

Paul A. Sasso
Print or Type Name of Officer

President

SECRETARIES DIV
CORPORATIONS DIV
305 MAR 15 PM 1:46

File Date 3/15/05
Check No. 12274
By: DA

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