

PROFIT CORPORATION ANNUAL REPORT

1996



State of Rhode Island and Providence Plantations
James R. Langevin, *Secretary of State*
Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335 • (401) 277-3040

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

PLEASE TYPE OR PRINT IN BLACK INK.

1. CORPORATE ID NO. 24100	2. NAME OF CORPORATION Abedon-Butwin Oil Company
3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE 1275 WAMPANOHG TRAIL SUITE #20	CITY EAST PROVIDENCE
4. BUSINESS PHONE NO. (401) 437-0808	STATE R.I.
5. STATE OF INCORPORATION RHODE ISLAND	ZIP CODE 02915
6. SIC CODE 1522	

7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND

OIL + GAS DEVELOPMENT

8. NAMES AND ADDRESSES OF THE OFFICERS			
PRESIDENT NAME RICHARD L. ABEDON	VICE PRESIDENT NAME JEROME T. BUTWIN		
STREET ADDRESS 3215 SANTA BARBARA DRIVE	STREET ADDRESS 1424 NO. FEDERAL HIGHWAY		
CITY WELLINGTON	CITY PACA LARON		
STATE FEA	STATE FEA		
ZIP CODE 33414	ZIP CODE 33431		
SECRETARY NAME NORMAN P. HABIB	TREASURER NAME NORMAN P. HABIB		
STREET ADDRESS 53 ANDERSON AVE	STREET ADDRESS		
CITY WARREN	CITY		
STATE R.I.	STATE		
ZIP CODE 02882	ZIP CODE		

9. NAMES AND ADDRESSES OF THE DIRECTORS			
DIRECTOR NAME RICHARD L. ABEDON	DIRECTOR NAME		
STREET ADDRESS 3215 SANTA BARBARA DRIVE	STREET ADDRESS		
CITY WELLINGTON	CITY		
STATE FEA	STATE		
ZIP CODE 33414	ZIP CODE		
DIRECTOR NAME	DIRECTOR NAME		
STREET ADDRESS	STREET ADDRESS		
CITY	CITY		
STATE	STATE		
ZIP CODE	ZIP CODE		

10. SHARES AUTHORIZED AND ISSUED					
AUTHORIZED SHARES			ISSUED SHARES		
NUMBER OF SHARES	CLASS / SERIES	PAR VALUE	NUMBER OF SHARES	CLASS / SERIES	PAR VALUE
8 000	\$1.00 PAR VAL		8000	Common	\$1.00 PAR

This report must be **SIGNED IN INK** by either the
President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

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.

File Date: 3/5/96
Check No: 1373
By: AMF

Signature of Officer
Norman P. Habib
Print or Type Name of Officer
Secretary

2-7-96
Date

For Secretary of State Use Only

DETACH BOTTOM BEFORE RETURNING

FORM 31 12/95