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FOR SECRETARY OF STATE USE ONLY

Check No.

Matthew A. Brown, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401.222.3040

(FORM MUST BE TYPED IN 1. Corporate ID No.	2. Name of Co	prporation	••• • • • • • • •	te described a la company	
3801	CATANZ	ARO and ASSOCIATES,	INC.		
3. Street Address Principal Bu. 3. WOODCREST DRIV	siness Office E		City JOHNSTON	State RI	Zip
4. Business Phone No. 4012315276		5. State of Incorporation RHODE ISLAND			02919 6. SIC Code
7. Brief Description of the Cha STRUCTURAL DRAFTI	racter of Business (Conducted in Rhode Island		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	7682
8. NAMES AND ADDRES	SSES OF THE O	FFICERS ("X" BOX FOR AT	ACHMENT) FILL IN S	PACES BEFORE USING A	VTTACHMENTS 3
MARJORIE CATANZAR	20		rice riesiaem name		
Street Address			BARTHOLOMEW CA	TANZARO	
3 WOODCREST DRIVE	· .		Street Address 3 WOODCREST DR	IVE	
City JOUNGTON	State	Zip	City	State	Zip
JOHNSTON	RI	;02919	JOHNSTON	RI	02919
ecretary Name	_		Treasurer Name		02313
LOUIS M. D'ANTUON	0		MARJORIE CATAN	ZARO	
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City	State	Zip	the state of the s		
OHNSTON	RI	02919	City JOHNSTON	State RI	<i>Zip</i> -02919
reet Address			Street Address		
ity	State	Zip	City	State	Zip
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reet Address			Street Address		
ity	State	Zip	City	State	Zip
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	in ink by eithe	er the President, Vice Pres	ident, Secretary, Assist	ant Secretary, Treasur	er, Receiver or Tru
s report must be signed	-			•	
s report must be signed	 		•	•	

Print or Type Name of Officer
PRESIDENT
Title of Officer

Signature of Officer

MARJORIE CATANZARO

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

Form 630 [2/0]



Check No.

FOR SECRETARY OF STATE USE ONLY

Matthew A. Brown, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401.222.3040

1. Corporate ID No. 3801	BLACK) 2. Name of Corpo CATANZAF	oration RO and ASSOCIATE	ES, INC.	CONTRACT CON	
3. Street Address Principal Bus 3 WOODCREST DRIV			City JOHNSTON	State	Zip
4. Business Phone No.		5. State of Incorpor	and the second s	RI	02919 6. SIC Code
4012315276		RHODE ISLA			7682
7. Brief Description of the Chair STRUCTURAL DRAFTING				*** *** * * * * * * * * * * * * * * *	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
8. NAMES AND ADDRES President Name	SES OF THE OF	FICERS ("X" BOX FO	ATTACHMENT) □ FILL IN S Vice President Name	SPACES BEFORE USING A	TTACHMENTS
MARJORIE CATANZAR	0		BARTHOLOMEW CA	ATANZARO	
Street Address		· · · · · · · · · · · · · · · · · · ·	Street Address		
3 WOODCREST DRIVE			. 3		
Zi <i>t</i> y	State	Zip	City	State	Zip
JOHNSTON	RI	02919	JOHNSTON	RI	02919
CITE M DIANTHON	2		Treasurer Name	7770	
OUIS M. D'ANTUON	J		MARJORIE CATAN	ZAKU	
ireet Address L304 ATWOOD AVENU	F		Street Address 3 WOODCREST DR	TVD	
iiv	State	Zip	City	State	
OHNSTON	RI	02919	JOHNSTON	RI	Zip 02919
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reet Address			Sireet Address		
<i>ty</i>	State	Zip	City	State	Zip
irector Name	Walter Art Walter Brown		Director Name		•
reet Address			Street Address		
ity	State	Zip	City	State	Zip
O. SHARES AUTHORIZE UTHORIZED SHARES	D ("X" BOX FOR.	ATTACHMENT)	II. SHARES ISSUED (*)	X" BOX FOR ATTACHMEN	
umber of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
e en e e e e e					
000 NO PAR VALUE			100	COMMON	NO-PAR
is report must ve signe	a in ink oy etine	r ine Presiaeni, vice	President, Secretary, Assi	siani Secretary, Treasi	irer, Receiver or 1.
98 308) 1808 8808	111				
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2 0 0	•			rjury. I declare and affirm t g any accompanying sched	
				= an + accommany me 50000	ares and statements.

PRESIDENT
Title of Officer

Print or Type Name of Officer

Signature of Officer
MARJORIE CATANZARO

Form 630 12/01

Edward S. Inman, III, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

Zip

6. SIC Code

02919-3332

7682

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003

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

(FORM MUST BE TYPED OR PRINTED IN BLACK) 1. Corporate ID No.

2. Name of Corporation

3801

CATANZARO and ASSOCIATES, INC.

3. Street Address Principal Business Office

3 WOODCREST DRIVE

4. Business Phone No 5. State of Incorporation

401-231-5276

RHODE ISLAND

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

STRUCTURAL DRAFTING SERVICES 8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

MARJORIE CATANZARO

Street Address

3 WOODCREST DRIVE

LOUIS M. D'ANTUONO

1304 ATWOOD AVENUE

City

JOHNSTON Secretary Name

RI

02919

RONALD R. CATANZARO

3 WOODCREST DRIVE

JOHNSTON

JOHNSTON

RI

State

State

RI

02919

Treasurer Name

Vice President Name

MARJORIE CATANZARO

Street Address

3 WOODCREST DRIVE

JOHNSTON RI 02919 **JOHNSTON** 02919 RI9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

Street Address

Director Name

Street Address

City

City

City

Street Address

City

State

Zip

Director Name

Director Name

Street Address

State

Zip

Zip

City

State

Zip

10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)

ISSUED SHARES

Street Address

Number of Shares

Class/Series

Par Value

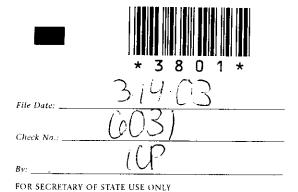
1,000 NO PAR VALUE

100

COMMON

NO-PAR VAL.

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

MARJOŘIE CATANZARO

PRESIDENT

Print or Type Name of Officer

Title of Officer **4573>> 5**

Form 630 12/02

Edward S. Inman, III. Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002 Filing Period: January 1-March 1 • Filing Fee: \$50.00

STOP PLEASE READ INSTRUCTIONS

(FORM MUST BE TYPED IN	BLACK)				
1. Corporate ID No.	2. Name of Corpor	ation			
3801	CATANZA	RO and ASSOCIATES, iN	C.		
3. Street Address Principal Busin			City	State	Zip
E WOODCRES	Γ DRIVE	5. State of Inverporation	JOHNSTON	RI	02919 6. SIC Code
401-231-523	76	RHODE ISLAN	ID		7682
7. Brief Description of the Chard		in Rhode Island			
8. NAMES AND ADDR			CID (CATE) FILL IN CDA CEC	DEEODE LICINIO APPRA	CHARDATTO
President Name	ESSES OF THE OFF	ICERS (A BOAFOR ATTA	Vice President Name	BEFORE USING ATTA	CHMENIS
MARJORIE CA	ATANZARO		RONALD R.	CATANZARO	
Street Address			Street Address	diction diction	
3 WOODCREST	Γ DRIVE		3 WOODCRES	ST DRIVE	
City	State	Zip	City	State	Zip
JOHNSTON	RI	02919	JOHNSTON	RI	02919
Secretary Name			Treasurer Name		
LOUIS M. D'	ANTUONO		MARJORIE C Street Address	CATANZARO	
1304 ATWOOD) AVENUE		3 WOODCRES	ST DRIVE	
City	State	Zip	City	State	Zip
JOHNSTON	RI	02919	JOHNSTON	RI	02919
9. NAMES AND ADDRI Director Name	ESSES OF THE DIRI	ECTORS ("X" BOX FOR AT	TACHMENT) FILL IN SPACE Director Name	S BEFORE USING ATE	ACHMENTS
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
Zity	State	Zip	City	State	Zip
10. SHARES AUTHORIZ	ED ("X" BOX FOR ATTA	CHMENT)	11. SHARES ISSUED ("X	" BOX FOR ATTACHMENT)
AUTHORIZED SHARES	(1) (C - 1)	D 11.1	ESSUED SHARES		
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1,000 NO PAR VALUE			100	COMMON	NO-PAR VAL.
			T 0 0	COMMON	NUTERK VALA

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



	3.11.02	
File Date:		
Check No.: _	5736	
Ву:	Z.	
	ARY OF STATE USE ONLY	-

Under penalty of periury, 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.

Mariane	Calanzaw	3-11-02
Signature of Officer MADIODIE CI	j p	ate
MADIADIE CA	ለጥለእ፣ፖለርስ	

MARJORIE CATANZARO

Print or Type Name of Officer

PRESIDENT
Title of Officer
5

Form 630 12/01

Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

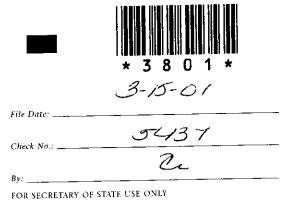
PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001

STOP

Filing Period: January 1-March 1 • Filing Fee: \$50.00 (FORM MUST BE TYPED IN BLACK) 1. Corporate ID No. 3801 2. Name of Corporation CATANZARO and ASSOCIATES, INC. 2in State 3. Street Address Principal Business Office 02919 RI JOHNSTON 3 WOODCREST DRIVE 7682 4. Business Phone No. 401-231-5276 7. Brief Description of the Character of Business Conducted in Rhode Island STRUCTURAL DRAFTING SERVICES FILL IN SPACES BEFORE USING ATTACHMENTS 8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) Vice President Name President Name RONALD R. CATANZARO MARJORIE CATANZARO Street Address Street Address 3 WOODCREST DRIVE 3 WOODCREST DRIVE State Zio City 02919 RI 02919 **JOHNSTON** RI**JOHNSTON** Treasurer Name Secretary Name LOUIS M. D'ANTUONO MARJORIE CATANZARO Street Address Street Address 3 WOODCREST DRIVE 1304 ATWOOD AVENUE 02919 RI02919 **JOHNSTON JOHNSTON** RIFILL IN SPACES BEFORE USING ATTACHMENTS 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) Director Name Director Name Street Address Street Address ZipState City Zip State Director Name Director Name Street Address Street Address Zip State Zip City State 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) 10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) ISSUED SHARES AUTHORIZED SHARES Par Value Class/Series Number of Shares Par Value Class/Series Number of Shares

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

100



1,000 SHS NO PAR VAL

Uncompenalty 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.

COMMON

Marnino	Calangair	3-14-01
Signature of Officer		Date

MARJÓRIE CATANZARO

Print or Type Name of Officer

PRESIDENT

Title of Officer

Form 630 12/00

NO-PAR VAL.



(FORM MUST BE TYPED IN BLACK)

3801

1. Corporate ID No.

James R. Langevin, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000 Filing Period: January 1-March 1 • Filing Fee: \$50.00

CATANZARO and ASSOCIATES, INC.

2. Name of Corporation

3. Street Address Principal Busines	s Office	-	City	State	Zip
3 WOODCREST 4. Business Phone No.	DRIVE	5. State of Incorporation	JOHNSTON	RI	02919 6. SIC Code
401–231–527 (7. Brief Description of the Character		RHODE ISLAND n Rhode Island			7682
STRUCTURAL 1 8. NAMES AND ADDRES President Name			HMENT) FILL IN SPACE Vice President Name	S BEFORE USING ATTAC	HMENTS
MARJORIE CA! Street Address	ranzaro		RON?	ALD R. CATANZA	RO
3 WOODCREST	DRIVE State	Zip	25 9	FALBUT ROAD State	Zip
JOHNSTON Secretary Name	RI	02919	HOPE Treasurer Name	RI	02831
LOUIS M. D'A	ANTUONO		MARJORIE Street Address	CATANZARO	
	ASTEMBLE		3 WOODCRE	EST DRIVE	
1304 ATWOOD	AAENOE				
JOHNSTON	State RI	Zip 02919	City JOHNSTON	State RI	^{Zip} 02919
Gity JOHNSTON 9. NAMES AND ADDRES Director Name	State RI	02919	City JOHNSTON		02919
City JOHNSTON 9. NAMES AND ADDRES Director Name Street Address	State RI	02919	City JOHNSTON ACHMENT) FILL IN SPAC Director Name	RI	02919
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File Date: Check No.:	5141	
Ву:	Cc	
FOR SECRETAR	RY OF STATE USE ONLY	

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.

Marjane Catani	ari	2-1-20
Signature of Officer	Date	
MARJORIE CATANZARO		

Print or Type Name of Officer PRESIDENT

Title of Officer

James R. Langevin, Secretary of State Corporations Division 100 North Main Street. Providence, RI 02903-1335 401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1999

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

(FORM	MUST	BE	TYPED	IN	BLACK

1. Corporate ID No.

2. Name of Corporation

|--|

CATANZARO and ASSOCIATES, INC.

3. Street Address Principal Business Office

JOHNSTON

State

Zip

3 WOODCREST DRIVE

5. State of Incorporation

RI

02919 6. SIC Code

RHODE ISLAND

7682

401-231-5270 RHG. Stription of the Character of Business Conducted in Rhode Island

STRUCTURAL DRAFTING 8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT)

FILL IN SPACES BEFORE USING ATTACHMENTS

BARTHOLOMEW S. CATANZATO

MARJORIE CATANZARO Street Address

WOODCREST DRIVE

3 WOODCREST DRIVE

JOHNSTON

RΙ

02919

JOHNSTON

RI

02919

MARJORIE CATANZARO

Street Address

BARTHOLOMEW S. CATANZARO Street Address

Treasurer Name

3 WOODCREST DRIVE

3 WOODCREST DRIVE

JOHNSTON

JOHNSTON

02919

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

Street Address

FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

Street Address

State

Zip

City

State

Zip

Director Name

Director Name

Director Name

Street Address

Street Address

City

State

Class/Series

Zip

Par Value

City

State

Zip

10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares

11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ISSUED SHARES

Number of Shares

Par Value

Class/Series

1,000 SHS NO PAR VAL

100

COMMON

NO-PAR VAL.

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



FOR SECRETARY OF STATE USE ONLY



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.

Title of Officer



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.

Number of Shares

2. Name of Corporation

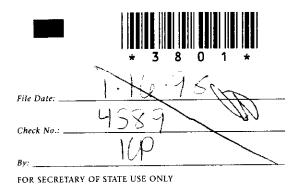
CATANZARO and ASSOCIATES, INC. 3801 ZipState 3. Street Address Principal Business Office 02919 **JOHNSTON** R.I. WOODCREST DRIVE 6. SIC Code 5. State of Incorporation 4. Business Phone No. 7682 401-231-5276 RHODE ISLAND 7. Brief Description of the Character of Business Conducted in Rhode Island STRUCTURAL DRAFTING 8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) Vice President Name MARJORIE CATANZARO BARTHOLOMEW S. CATANZARO Street Address Street Address 3 WOODCREST DRIVE WOODCREST DRIVE City Zip City 02919 R.I. 02919 JOHNSTON R.I. **JOHNSTON** Treasurer Name Secretary Name BARTHOLOMEW S. CATANZARO MARJORIE CATANZARO Street Address Street Address 3 WOODCREST DRIVE 3 WOODCREST DRIVE Zip City Zip City 02919 RI **JOHNSTON** 02919 RI **JOHNSTON** 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) Director Name Director Name Street Address Street Address Zip City City Director Name Director Name Street Address Street Address City City 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) 10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) ISSUED SHARES AUTHORIZED SHARES

NO PAR VALUE 100 1,000 SHS NO PAR VAL

Number of Shares

Par Value

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



Class/Series

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 hereinary true and correct.

Class/Series

BARTHOLOMEW S. CATANZARO

Print or Type Name of Officer

PRESIDENT

Title of Officer

Par Value



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

PROFIT CORPORATION ANNUAL REPORT 1997 Filing Period: January 1-March 1 • Filing Fee: \$50.00 (FORM MUST BE TYPED IN BLACK) 1. Corporate ID No. 2. Name of Corporation 3801 CATANZARO and ASSOCIATES, INC. 3. Street Address Principal Business Office State Zip3 Woodcrest Drive RI Johnston 02919 4. Business Phone No. 6. SIC Code 5. State of Incorporation **RHODE ISLAND** 7682 (401) 231-5276 7. Brief Description of the Character of Business Conducted in Rhode Island Structural drafting 8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) Vice President Name Bartholomew S. Catanzaro Marjorie Catanzaro Street Address Woodcrest Drive 3 Woodcrest Drive City Zip 02919 Johnston RIJ0hns ton 02919 RΙ Secretary Name Treasurer Name Marjorie Catanzaro Bartholomew S. Catanzaro Street Address Street Address 3 Woodcrest Drive 3 Woodcrest Drive City Zip Zip Johnston RI 02919 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) Director Name Director Name Street Address Street Address City Zip State City State ZipDirector Name Director Name Street Address Street Address City City State Zip State Zio 10. SHARES AUTHORIZED AND ISSUED ("X" BOX FOR ATTACHMENT) AUTHORIZED SHARES ISSUED SHARES Number of Shares Class/Series Par Value Number of Shares Class/Series Par Value 1,000 SHS NO PAR VAL 100 No par value This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

	* 3 8 0 1 *	
File Date:	1997	
Check No.:	43.34	
By:FOR SECRETARY	OF STATE USE ONLY	

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.

Signature of Officer

Bartholomew S. Catanzaro

Print or Type Name of Officer

President

Title of Officer

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.

2. NAME OF CORPORATION

3801

CATANZARO and ASSOCIATES, INC.

3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE

ZIP CODE

RΙ

02919 6. SIC CODE

4. BUSINESS PHONE NO.

5. STATE OF INCORPORATION

401-231-5276

RHODE ISLAND

7682

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

3 Woodcrest Drive

Structural drafting

AND ADDRESSES OF THE OFFICERS 8. NAMES VICE PRESIDENT NAME

STREET ADDRESS

CITY

Bartholomew S. Catanzaro

Marjorie Catanzaro

3 Woodcrest Drive

3 Woodcrest Drive

ZIP CODE

STATE

ZIP CODE

Johnston

Johnston

RΙ

02919

Johnston TREASURER NAME

RI

02919

SECRETARY NAME

Marjorie Catanzaro

3 Woodcrest Drive

STREET ADDRESS

3 Woodrest Drive

Bartholomew S. Catanzaro

ZIP CODE

CITY

STATE

ZIP CODE

Johnston

RΙ

02919

Johnston

RΙ

02919

DIRECTOR NAME

AND ADDRESSES OF THE DIRECTORS

DIRECTOR NAME

STREET ADDRESS

STATE

STATE

ZIP CODE

ZIP CODE

CITY

STATE

ZIP CODE

DIRECTOR NAME

DIRECTOR NAME

STREET ADDRESS

STREET ADDRESS

File Date:

Check No:

By:

NUMBER OF SHARES

CITY

STREET ADDRESS

STATE

ZIP CODE

SHARES AUTHORIZED AND ISSUED

AUTHORIZED SHARES CLASS / SERIES

PAR VALUE

NUMBER OF SHARES

ISSUED SHARES CLASS / SERIES

PAR VALUE

1,000 SHS NO PAR VAL

100

No Par Value

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

Signature of Officer

Bartholomew S. Catanzaro

alangaro

all statements contained herein are true and correct

Print or Type Name of Officer President

For Secretary of State Use Only

Title of Officer

State of Rhode Island and Providence Plantations Office of The Secretary of State 100 North Main Street Providence, Rhode Island 02903-1335 401-277-3040

Business entity organized under the laws of the State of: Rhode Island

BARTHOLEMEW 5. CATANZARO

RI 02919

3 WOODCREST DRIVE

JOHNSTON

0003801

Corporate ID:

Name of Corporation:

ANNUAL REPORT

Please Type or Print
File Annually – Jan. 1 - March 1
Filing Fee \$50.00
Make Checks Payable to: Secretary of State

1995

Annual Report for the year:

Business Entity is (check one):

ALL ENTRIES MUST BE COMPLETED IN FULL OR THE FORM WILL BE RETURNED.

CATANZARD and ASSOCIATES, INC.

For foreign entity, address and telephone number of	f principal office:		[x] Business Corporation (See RIGL Chapter 7-1.1) [] Professional Service Corporation (See RIGL Chapter 7-5.1)				
Phone: ()			nt of the character of business courral drafting	nducted in Rhode Island:			
Address and telephone of the principal office of bus	riness entity in Rhode						
Island (Provide street address - Not P.O. Box):	siness citity in knode						
Island (1 lovide street address - 110t 1.0. Dox).							
3 Woodcrest Drive Johnston, RI 02919 Phone: (401) 231-5276							
Phone: (401) 231-3270							
	THE NAMES OF	THE OFFICERS A	ARE:				
PRESIDENT		ADDRESS	CITY/STATE	XIb CODI			
Bartholomew S. Catanzaro	3 Woodcrest	Drive	Johnston, RI	02919			
VICE PRESIDENT	STREET	ADDRESS	CITY/STATE	ZIP CODE			
Marjorie Catanzaro	3 Woodcrest	Drive	Johnston, RI	02919			
SECRETARY	STREET	ADDRESS	CITY/STATE	ZIP CODI			
Marjorie Catanzaro	3 Woodcrest	Drive	Johnston, RI	02919			
TREASURER		ADDRESS	CITY/STATE	ZIP CODE			
Bartholomew S. Catanzaro	3 Woodcrest	Drive	Johnston, RI	02919			
	THE NAMES OF T						
NAME	STREET	ADDRESS	CITY/STATE	ZIP CODE			
NAME	STREET	ADDRESS	CITY/STATE	ZIP CODE			
NAME	STREET /	ADDRESS	CITY/STATE	ZIP CODE			
NUMBER OF SHARES AUTHORIZED (Rider may be	e attached)	NUMBER OF SHA	RES ISSUED AND OUTSTANDIN	IG (Rider may be attached)			
Number of Shares Class / Series		Number of Shares	s Class / Series				
1,000 Common		100	Common				
Date March 2/ . 19°		Souther					
	Ba	artholomew S.	Catanzaro \				
		TYPENAME OF OFFICER SI	UNING				
Form 31 1/95		OFFICER SIGNING					
	FED REGISTERED AC						
PLEASE NOTE: If the registered office and/or reg	istered agent indicated belo	ow is incorrect, Form 9	must be filed.				

Filing Fee \$50.00 Payable to: Secretary of State

PLEASE TYPE or PRINT

Fife Annually LLC: Sept. 1 - Nov. 1 CORP: Jan. 1 - March 1 State of Rhode Island and Providence Plantations Office of The Secretary of State

100 North Main Street
Providence, Rhode Island 02903-1335
401-277-3040

Corporate ID:	0003501		Annu	ial Report for i	the year:		19	194
Name of Business Entity	:			CATANZA	FO and 4	550	CIATES	INC.
Business entits organized un	der the laws of the State of: Rhodo	e Isl	Land	Business Entity	is (check one):			
Federal Taxpayer Identificati				Prof	iness Corporati essional Servic ited Liability C	e Corpo	oration (See	RIGL Chapter 7-5.1)
	,			Name, title and recommunications BARTHO	•	2d:		
				3 Wood	crest D	rive		
Phone: ()			_ .	Johnst	on, RI	0291	9	
Address and telephone of the Island (Provide street address	e principal office of business entity i s - Not P.O. Box):	n Rhode	-	Jai d'ara assari	of the oburner	ا سخا کست	la	ted in Rhode Island:
.3 Woodcrest D	rive							ted iii Khoge Island.
Johnston, RI	02919							
				Date of Organiza	ation:	1/1	3/84	
Phone: 401 231-	5276			One of Qualific	ation to do bus	iness in	Rhode Islar	id (if foreign entity):
	THE	NAMES	S OF THE O	FFICERS AF	RE:			
Bartholomew S	PRI SIDENT of heek One:		odcrest		Johns	ton.	RI	инсов 02919
☐ CHELOPIC VINCONSCRICT Marjorie Cata			odcrest			81 111		71PC ODT 02919
☐ COSTODIANO RECORDS OF A			odcrest	Drive		87 (11		02919
Bartholomew S.	X 2RF VSURLK (Check One)	S	odcrest			S2 431		02919
		AMES	OF THE DI	RECTORS A	RE:	<u>-</u> -		
NAMI		8	TREET ADDRESS		CDD/	STAIT		Vib.Co48
N AVIII		S	TREET AUDRESS		CITY	ST VIII		ZIE CODI
NVMI.	——————————————————————————————————————	STREET ADDRESS		CITY	STATE		NE CODI	
NUMBER OF SHARES AU	CTHORIZED (If Applicable)		NU	MBER OF SHA	RES ISSUED	AND C	DUTSTAND	ING (If Applicable)
NUMBER	1000		NU	MBER	100			
CLASS	Common		CL	ASS	Commo	on		
SERIES			SEF	HES				
PAR VALUE OR WITHOUT PAR	Without par		-	R VALUE OR THOUT PAR	With	out ;	par	
Date Mail	<u> </u>	ſ	3y: 1/2	Adala			21	<u> </u>
		F	RINT OR TYPL NAM	Bartho of officialism	lomew S.	. Ca	tanzar	
		ī	тит огојајсја 8	Presid	ent			
Form 31 1/94								
I	DESIGNATED REGISTERE	D OR I	RESIDENT A	GENT FOR	SERVICE C	FPRO	OCESS:	·

PLF ASE NOTE: If the Corporation has changed its registered office and/or registered or resident agent. Form 9 or Form U.C.3 most be filed.



To be filed annually between January 1st and March 1st

Z937 18 Jan State of Rhode Island and Providence Plantations CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903 0003801

Corporate ID	0003801	Annual Report for the year	ar 1999
First: The n	ame of the corporation is	CATANZARO and ASSOC	IATES, INC.
Second: It is	s incorporated under the laws of	Rhode Island	
THIRD: Chara	acter of business, briefly stated, i	Structural drafti	ng
FOURTH: If fo	oreign corporation, address of its	s principal office	
FIFTH: Busine	ess address in Rhode Island3	Woodcrest Drive, Johnston	n, RI 02919
	s and addresses of its directors a		(Attach rider if necessary)
	Director Director		
	Director		
Bartholomew			·
		ident 3 Woodcrest Drive, Jo	
Marjorie Cat		2	
Marjorie Cat		0.77	
Bartholomew	S. Catanzaro Treasurer	3 Woodcrest Drive, Jo	ohnston, RI 02919
SEVENTH: Nu	mber of Shares authorized:		Par Value or statement that
No. of Shares	Class	Series	shares are without par value
1000	А	1	No-par value
Еіднтн: Num	iber of Shares issued:	PAID FERRESIDA	Par Value or statement that shares are without
No. of Shares	Class	FEB 2 6 1993	pa. ratus
100	A	SECRETARY OF STAT	₹ No-par value
Dated Februa	ry 12, 19 93	CATANZARO AND ASSOCI	IATES, INC.
(Papart mu	ast he signed by an officer)	Title President	

State of Rhode Island and Frovidence Flantations CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

Corporate ID	0003801	Annual Report for	the year1992
First: The name	of the corporation is	CATANZARO an	H.ASSOCIATES,INC
Second: It is inco	orporated under the laws of	RHODE ISLAND	
THIRD: Character	of business, briefly stated, i	s Structural drafting	
FOURTH: If foreig	n corporation, address of its	s principal office	
FIFTH: Business a	ddress in Rhode Island3	Woodcrest Drive, Jol	nnston, RI 02919
Name	d addresses of its directors a		(Attach rider if necessary) g number, street, zip code)
	Director		
	Director		
Bartholomew S.	Director Catanzaro President	3 Woodcrest Drive	e, Johnston, RI 02919
			Johnston, RI 02919
Marjorie Catanz			e, Johnston, RI 02919
Bartholomew S.	-		e, Johnston, RI 02919
SEVENTH: Numbe	r of Shares authorized:		Par Value or statement that shares are without
No. of Shares	Class	Series	par value
1000	А	1	par value
Еіднтн: Number	of Shares issued:	aled.	shares are without par value Par Value or statement that shares are without par value no par value
No. of Shares	Class	Series . A &	par value
100	Α	G	no par value
Dated February 5	19 92	CATANZARO AND ASSOCI	ATES, INC.
		By all mens	0
(Report must be	signed by an officer)	Title President	

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID	0003801	Annual Ro	eport for th	e year1991
FIRST: The name	-			ASSOCIATES,INC
Second: It is inc	orporated under the laws of			
THIRD: Characte	r of business, briefly stated, is.			
FOURTH: If foreign	gn corporation, address of its p	orincipal office		
FIFTH: Business a				Johnston, RI 02919
SIXTH: Names an	d addresses of its directors and		ress (including n	(Attach rider if necessary)
	Director			
	Director			
······································	Director			
Bartholomew S.	Catanzaro President	3 Woodcrest	Drive	Johnston, RI 02919
Marjorie Catan	zaro Vice Presid	ent 3 Woodcrest	Drive,	Johnston, RI 02919
Marjorie Catan	zaro Secretary	3 Woodcrest	Drive	Johnston, RI 02919
Bartholomew S.	Catanzaro Treasurer	3 Woodcrest	Drive,	Johnston, RI 02919
	er of Shares authorized:	Series Series		Par Value or statement that shares are without
No. of Shares	Class A	Series	N.	parvalue no par value
1000	A	,c ² °	20	no par varue
Eіднтн: Number	of Shares issued:	ر م	199	Par Value or statement that
No. of Shares	Class	Series	PA	shares are without par value
100	А	1	ζ,	no par value
Dated January 3	19.91	CATANZARO AN (Name of Corporation)	d assoc	TIATES, INC.
(Report must be	e signed by an officer)	Title President		

State of Rhode Island and Providence Plantations CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

02
1.9.9.0
0.2.9.1.9
ch rider if necessary)
n.,RI0.2.9.1.9
<u>" "</u>
n n
'' '' r Value ement that are without
r Value ement that are without r value

Corporate ID3.8.0.1	4	Annual Rep	ort for the year	990
FIRST: The name of	of the corporation isC.	ATANZARO and ASSOC	IATES, INC.	
SECOND: It is incor	porated under the laws	ofRhade I.sl	and	
THIRD: Character of	of business, briefly stated	l, isStructurald	rafting	
FOURTH: If foreign	corporation, address of	its principal office		
FIFTH: Business add	dress in Rhode Island	.3Woo.dcrestDrive	"Johnston., RI	0.2.9.1.9
SIXTH: Names and	addresses of its directors		(Attac	ch rider if necessary)
	Directo	or		
	Directo	or		
	Directo	r		
BartholomewSC	atanzaro Preside	nt 3Woodcrest	Drive,Johnsto	n.,R.I0.2.9.1.9
MarjorieCatanza	vo Vice Pr	esident"	<u>n</u> <u>n</u>	11
MarjorieCatanza	zo Secretai	ry	n	n n
BartholomewSC.	itanzaroTreasur	er 4	"	" "
SEVENTH: Number	of Shares authorized:			Value ement that
No. of Shares	Class	Series	shares a	re without value
1,000	A	1	Without po	ar value
EIGHTH: Number of	Shares issued:	_		Value
No. of Shares	Class	PA/	or state shares a	ment that re without value
100	A	SECTY OF C	1990 without po	ır value
DatedIanuary1.9.,	199. <i>0</i>	(Name of Corporation) By Dankhar	TATE ASSOCIATES, IN	2
(Report must be sig	gned by an officer)	Title President		

State of Rhode Island and Frovidence Plantations CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

Corporate ID3 & 0.1		An	nual Report	for the year	.1.9.8.9	
First: The name of	f the corporation isCA	NTANZARO…an	dAS.S.O.C.I.	ATES,INC	• • • • • • • • • • • • • • • • • • • •	•••••
Second: It is incorp	porated under the laws of	fRhode	Island			
THIRD: Character o	f business, briefly stated,	isStructur	al…draft	ing		
FOURTH: If foreign	corporation, address of it	s principal office)			
FIFTH: Business add	ress in Rhode Island3	Woodcrest	Drive,	Johnston,	RI 02	919
SIXTH: Names and a	addresses of its directors a		Address (inc	(luding number, stree	-	er if necessary)
	Director					
	Director				•••••	,
	Director				***************************************	
Bartholomew.SCat	anzano President	.3Wo.odo	rest.Dr.	ive,John.	s.to.n.,	R.I0.2.9.1.9
larjorieCatanzaro	Vice Pres	sident .""	11 11	11 11	11	<u>n n n</u>
larjorieCatanzaro	Secretary	<i>.</i>	n n		#	# # #
irtholomewSCata	n.zahaTreasurei	r .!!!!	11	<u>n</u> n	11	
SEVENTH: Number of	of Shares authorized:				Par Value or statement t	hat
No. of Shares	Class	s	eries	\$	shares are with par value	nout
1,000	A	1	,	with	out pa	r value
EIGHTH: Number of	Shares issued:	Dan			Par Value or statement t	hat
No. of Shares	Class	PAIDs		S	shares are with par value	nout
100	A	FEB 6 199		With	out pa	r value
DatedJanuary1.9.,	S	CATANZARO (Name of Corporation	.an.dASS(OCIATES	INC	
(Report must be sig	ened by an officer)	By John Title Presi	dent)	

State of Rhode Island and Frovidence Flantations CORPORATIONS DIVISION 270 WESTMINSTER MALL PROVIDENCE, RHODE ISLAND 02903

Corporate ID3	Annual Report for the year 1987 /989							
FIRST: The	name of the corporat	ion is CATAN	ZARO a	and ASS	OCIATES, I	NC,	•••••••••••••••••••••••••••••••••••••••	
Second: It i	s incorporated under	the laws of	*************					
	racter of business, bri							
FOURTH: If f	oreign corporation, a	ddress of its prin						
Fifth: Busine	ess address in Rhode						9.19	
	s and addresses of its	directors and of	fficers:	A	ddress (including n	(At	tach rider if necess	
		Director	•	**********	************************	***************************************	******************************	••••
	•••••	. Director	••••••	•••••••		****************	•••••	•••••
	•••••••••••••••••••••••••••••••••••••••		***********	••••••••	•		••••••	.
	Catanzaro		3 Wo	odcres	t Drive, J	ohnston,	RI	····
Marjorie Catanz	aro	. Vice President		11		11		••••
Marjorie Catanz	aro	Secretary	11	1.1			11	
Bartholomew S. (Catanzaro	Treasurer .					11	
	nber of Shares author					P: or sta	ar Value stement that	
No. of Shares	Class			Series			ar value	
	A			1	9449 389	no p	ar value	
Еіднтн: Numb	per of Shares issued:					3 A	r Value tement that	
No. of Shares	Class			Series			are without ir value	
100	Α			1		no j	par value	
Dated February 🛊	19 3	F	CAT of Corpora		AND ASSOC	IATES, IN	VC.	. .
(Report must	be signed by an officer)	Title		Pro	sident			

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations CORPORATIONS DIVISION 270 WESTMINSTER MALL PROVIDENCE, RHODE ISLAND 02903

Corporate ID 380	1	•••••		Annua	-	the vear	1987
First: The nan	ne of the corpor	ration is CATA	ANZARO	and AS	SOCIATES.	INC,	
SECOND: It is in	corporated und	ler the laws of	*************	Rho	de Island	••••••	
THIRD: Characte	er of business, b	oriefly stated, is	ST	ructura	ldraf.ting		
Fourth: If forei	gn corporation,	address of its pr	incipal	office			
			••••••		************	•••••	919
Name		ts directors and o	officers		ddress (including	(Att	ach rider if necessary)
			**********	*************	***************************************	••••••	
			••••••	••••••	•••••••	••••••••••	
Bartholomew S. Cata		Director				•	
		President	3 N	loodcres	t Drive,	Johnston,	RI
Marjorie Catanzaro Marjorie Catanzaro	***************************************	Vice President	***********		11	††	11
		Secretary					
Bartholomew S. Cata							11
SEVENTH: Number	of Shares author	orized:				Par	Value
No. of Shares	Class			Series		shares a	ment that re without value
1000	A			1		-	r value
Еіднтн: Number of	Shares issued:	PAID					Value
No. of Shares	Class	MAR U 9 198	! <i>[</i>	Series		shares are	
100		SEC'Y OF ST	ATE	1		no pa	
ted February 12,	19 .8	********	CAT of Corpora	ANZARO	AND ASSOC	IATES, INC	
		Ву	10/	Laton		Sta	
(Report must be sign	ned by an officer)	Title	***********	Pres.	ident	(.	

January 15t and March 15t

State of Rhode Island and Providence Plantations CORPORATIONS DIVISION 270 WESTMINSTER MALL PROVIDENCE, RHODE ISLAND 02903

Corporate II	<u> </u>			Annual l	Report for t	he yearl	.986
First:	The name of the corpo						
	o: It is incorporated ur						
Third:	Character of business,	briefly stated,	is	Structura	l draft	ing	·····
Fourth	r: If foreign corporation	n, address of it	s princi				
Г ігтн:	Business address in Rh						
Ѕіхтн:	Names and addresses of		nd offic	cers:			ch rider if necessary
	••••••	Director		••••••		***************************************	
	••••••••••••••••••••••••••••••	Director			•	*********************	*********************
***************************************	***************************************	Director	•••	********************	**************	***************************************	•••••
Bartholo	mew S. Catanzaro	President		Woodcres			
Marjorie	Catanzaro	Vice Pres	ident	11	11	11	•••••
Marjorie	Catanzaro			"	п	10	••••••••••
Bartholom	B	•		11	U .	ę;	
Seventh	: Number of Shares a	uthorized:				Pa	r Value
No. of Sha	ures C	lass		Series		or stat shares	ement that are without r value
1,000)	A .		1		Without	par value
. Еіднти:	Number of Shares issu	ied:					r Value
No. of Sha	il e C	lass		Series		shares :	ement that are without r value
100)	A		1		Without	par value
ated	- 22	19 <u>86</u>		CATANZARO (Corporation)	AND ASS	OCIATES,	INC
	MAR 15 RECO	$V_{\mathcal{I}}$	Rv A	B-111		11	≫
(Re	port must be signed by an of	Ticer)	Title	Presider	rt.		***************************************
rm 31 1/85	per most oc signed by an or	ncer)	1 IIIC				

CATANZARO and ASSOCIATES, INC. BARTHOLEMEW S. CATANZARO 3 WOODCREST DRIVE JOHNSTON RI 02919

ANRE CHEK 0198A001

02/14/86 PACD

State of Rhode Island and Providence Plantations CORPORATIONS DIVISION 270 WESTMINSTER MALL PROVIDENCE, RHODE ISLAND 02903

Corporate ID 3801		Annual	Report for the	year 1985
First: The name	of the corporation is	CATANZARO and ASSO	CIATES, INC.	
SECOND: It is income	orporated under the laws	of Rhode	Island	
THIRD: Character	of business, briefly stated	i, is Structur	al draftin	<u>g</u>
FOURTH: If foreig	n corporation, address of	its principal office		
FIFTH: Business a	ddress in Rhode Island	3 Woodcrest Dr	ive, Johns	ton, RI 02919
SIXTH: Names and	d addresses of its director		Address (including num	(Attach rider if necessary) ber, street, zip code)
	Directo	or		
	Directo	or		
	Directo		••••••	•••••
	Catanzaro Preside	nt 3 Woodcres	st Drive,	Johnston, RI
Marjorie Catanza	······································	resident"	н	#
Marjorie Catanza	Secieus	ry	U	
Bartholomew S. (Catanzaro Treasu	гет	19	n
SEVENTH: Number of Shares authorized:				Par Value or statement that
No. of Shares	Class	Series		shares are without par value
1,000	A	1	Ţ	Without par value
Еіднтн: Number	of Shares issued:			Par Value or statement that
No. of Shares	Class	Series		shares are without par value
100	A	1	Ţ	Vithout par value
Dated February 1	1985		AND ASSO	CIATES, INC.
RECEI+ me	^ 19 85	(Name of Corporation) By	Como S	Ostono
(Report must be	signed by an officer)	Title Preside	nt	