

## 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 401-222.3040

2005

### PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR \_\_\_\_\_

Filing Period: January 1 - March 1 • Filing Fee: \$50.00 (FORM MUST BE TYPED OR PRINTED IN BLACK) 1. Corporate ID No. 2. Nanie of Corporation 9902 AUGUST W. MENDE, INC 3. Street Address Principal Business Office Providence 02908 235 Chalkstone Avenue Rhode Island 4 Business Phone No. 5. State of Incorporation 6. SIC Code 401 331 5484 RHODE ISLAND 414 . Brief Description of the Character of Business Conducted in Rhode Island WOODWORKING, GENERAL CARPENTRY 8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS President Name Vice President Name Shirley V. Mende none Street Address Street Address 12 Bigelow Road State R.I. Johnston City 02919 State Zip .................. Secretary Name Treasurer Name Robert H. Mende Robert H. Mende Street Address Street Address 12 Bigelow Road 12 Bigelow Road State Ζip ZibJohnston R.I. 02919 Johnston R.I. 02919 9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS Director Name Director Name Robert H. Mende Street Address Street Address 12 Bigelow Road State R.I. City Zip Johnston 02919 Director Name Director Name Susan Pagliaro Shirley V. Mende Street Address 22 Mowry Avenie Street Address 12 Bigelow Road State ZiDZip Johnston R.I. 02919 Johnston R.I. 02919 10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) AUTHORIZED SHARES ISSUED SHARES Number of Shares Class/Series Par Value Number of Shares Class/Series Par Value 600 COMM NO PAR VALUE 63 Treasury no par value

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

Ette Date	205/05
Check No	(300)
Ву:	
	FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I ha	ave examined this report,
including any accompanying schedules and statement contained begin are the and correct	s, and that all statements
	2/2.405
Signature of Officer	Date
Robert H. Mend e	!
Print or Type Name of Officer	
Secretary, Treaskurer	
Title of Officer	



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

Form 630 Rev. 12/03

401.222.3040

#### PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR \_\_\_\_\_ 2004

Filing Period: January 1 - Mo (FORM MUST BE TYPED OR PRIN		Fee: \$50.00			
1. Corporate ID No. 9902	2. Name of Corporation AUGUST W. MEN	NDE, INC.			
3. Street Address Principal Business O 355 CHALKSTONE			TROVIDENCE	State RHODE SLAND	2ip 02908
4. Business Phone No.		5. State of Incorporation	I ROUIDENCE	PHODE SLAND	6. SIC Code
(401) 331-541		RHODE ISLAND			414
7. Brief Description of the Character of WOODWORKING, GENE	f Business Conducted in Ri RAL CARPENTRY	bode Island			
8. NAMES AND ADDRESSES President Name		("X" BOX FOR ATTA	CHMENT)	ACES BEFORE USING A	ITACHMENTS
Street Address			None	<del></del>	
12 BIGELOW	Road		Street Address		
JOHNSTON	State R.I	02919	City	State	Zip
Secretary Name POBERT H	MENDE		Treasurer Name	MENDE	
Street Address	RD.		Street Address	Rd	
City	State	Zip	12 BIGELOW	State	Zip D. D. G. I. G. I.
9. NAMES AND ADDRESSES	FR. I	02919 : ("X" BOX FOR ATT	JOHN STON	R.I.	02616.
Director Name	or the birectors	. ( A BOX FOR AII.	Director Name	PACES BEFORE USING	ATTACHMENTS
1,0,000	lende_	0 Tanah	Shirley V	MENDE	
Street Address 12 16ELOW-	PRO		Street Address	NED.	
City	State	Zip	City.—	State	Zip
Director Name	K.T	02919	Director Name	1, 1, 7	02919
Susan Pag	liaro				
Street Address  22 Mow Ry	JA1 ENUC		Street Address		
Johnston	State	Zip 02919	City	State	Zip
10. SHARES AUTHORIZED (	"X" BOX FOR ATTA		11. SHARES ISSUED ("X	 " BOX FOR ATTACHME	$ NT\rangle$
AUTHORIZED SHARES	7/E		ISSUED SHARES		
Number of Shares c	Class/Series I	Par Value	Number of Shares	Class/Series	Par Value
600 COMM NO PAR VALUE			63	Treasury	no par value
					<b>1</b>
This report must be sign	ned in ink by either	the President. Vice Pre	esident, Secretary, Assistant S	Secretary Treasurer Rec	eiver or Tructee
	9.0.2 *		Under penalty <b>7</b> 0f perjury	, I declare and affirm that I ying schedules and matemet	have examined this report,
File Date	3/04/		contained herein are true	Pand Correct.	
Check No. 12	147		Signature of Officer		2 - 19·04 Date
By:	5		Print or Type Name of Off	· Mende	
FOR SECRETARY OF STATE	E USE ONLY		Secretar	y Treasur	e-
			Title of Officer	• •	

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

## 401-222-3040

#### PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR \_2003 Filing Period: January 1-March 1 • Filing Fee: \$50.00

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(EODA)	ACTION DE TAN	ED OR DRI	NTED IN BLACK)		
$(I'' \cup KUVI$	DIUSI DE LII:	ED $OR$ $PRG$	NIED IN DEAUN		

1. Corporate ID No.

2. Name of Corporation

9902 3. Street Address Principal Business Office AUGUST W. MENDE, INC.

235 Chalkstone Avenue

Providence

City

Rhode Island

4. Business Phone No.

5. State of Incorporation

02908

6. SIC Code

401 331 5484

RHODE ISLAND

414

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

Woodworking, General Carpentry

8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) President Name

FILL IN SPACES BEFORE USING ATTACHMENTS

State

Shirley V. Mende

Street Address

Street Address

12 Bigelow Road

State Zip

Treasurer Name

Street Address

Director Name

Street Address

Director Name

Zip

Johnston

Rhode Island 02919

Secretary Name Robert H. Mende

Street Address

12 Bigelow Road

Johnston

Rhode Island 02919

Zip

City

12 Bigelow Road

Shirley V. Mende

Robert H. Mende

12 Bigelow Road

City

Johnston

Johnston

Rhode Island

Rhode Island 02919

9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

Robert H. Mende

12 Bigelow Road

Rhode Island 02919

Johnston Director Name

Susan Pagliaro

Street Address

22 Mowry Avenue

Johnston

State

Zip

City

State

Street Address

Rhode Island 02919

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

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

State

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

ISSUED SHARES

Number of Shares

Class/Series

Par Value

600 COMM NO PAR VALUE

63

Treasury

no par value

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



Check No .:

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

Robert H. Mende Print or Type Name of Officer

≪ಪ್∓ಹಿಕ್ಕಿ

<u>Secretary, Treasurer</u> Title of Officer

Form 630 12/02



(FORM MUST BE TYPED IN BLACK)

Secretary Name

Edward S. Inman, 111, 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 PLEAST READ PNSTRUCTIONS

l. Corporate ID No.	2. Name of Corporal	tion	•		
9902	AUGUST W.	MENDE, INC.			
3. Street Address Principal Bus		,	City	State	Zip
235 Chalkst	one Avenue	Provid	dence	Rhode Isla	
Business Phone No.		5. State of Incorporation	on		6. SIC Code
401 - 331 5  Brief Description of the Char	484 racter of Business Conducted in	RHODE ISLA	ND		414
	General Carp	• •			
B. NAMES AND ADDI resident Name	RESSES OF THE OFFI	CERS ("X" BOX FOR ATT	ACHMENT) FILL IN S  Vice President Name	SPACES BEFORE USING ATTACE	IMENTS
Shirley V. M	ende				
reet Address		•	Street Address		
12 Bigelow	Road				
ity	State	Zip	City	State	Zip
Johnston	R.I.	02919	•		2.14

Robert H. Mende

Street Address

12 Bigelow Road

City

State

Zip

Johnston

R.I.

Robert H. Mende

Street Address

12 Bigelow Road

City

State

Zip

Johnston

R.I.

02919

Johnston

R.I.

02919

Treasurer Name

9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

Robert H. Mende
Street Address

12 Bigelow Road
City State Zip City State Zip

Johnston R.I. 02919
Director Name
Susan Pagliaro

Shirley V. Mende
Street Address
City Road
City State Zip
Director Name
Susan Pagliaro

Street Address

22 Mowry Avenue

City State Zip City State Zip

Johnston R.I. 02919

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

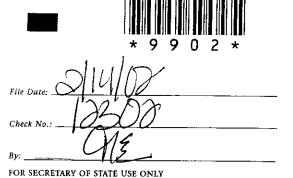
Number of Shares

Class/Series

600 COMM NO PAR VALUE

(K 63 Treasury Treasury 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 all statements contained begin are true and correct.

Signature of Officer I IIII

Robert H. Mende
Print of Type Name of Officer

Secretary, treasurer

Title of Officer
5

Form 630 12/01

Corporatio 100 North Main Street, Providence, RI 02...-401-222-3040

#### 2001 PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

2. Name of Corporation

9902

AUGUST W. MENDE, INC.

3. Street Address Principal Business Office

Providence,

RHODE ISLAND

State

Zip

235 Chalkstone Avenue

Rhode Island

4. Business Phone No.

5. State of Incorporation

(401) 331 5484

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

Woodworking,	General	Carpentry	
			FILL IN SPACES BEFORE USING ATTACHMENTS

Shirley V. Mende

Vice President Name

Street Address

President Name

Street Address

12 Bigelow Road

City

State

Zip

City

City

Johnston, Secretary Name

R.I.

02919

Treasurer Name

Robert H. Mende

Robert H. Mende

Street Address

Street Address 12 Bigelow Road

12 Bigelow Road

Robert H. Mende

12 Bigelow Road

City

State

02919

Johnston

R.I.

State

State

R.I.

02919

Johnston

Johnston,

R.I.

State

9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Street Address

Director Name

Shirley V. Mende

Street Address

12 Bigelow Road

State R.I. Zip02919

Director Name

Susan Pagliaro

Johnston,

Street Address

Director Name

Street Address

22 Mowry Avenue

Zip

Par Value

02919

State

Zip

Par Value

02919 R.I. Johmston,

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

Number of Shares

Check No .:

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

ISSUED SHARES

AUTHORIZED SHARES

Class/Series

Number of Shares

Class/Series

600 SHS NO PAR COM

102 Common

Common

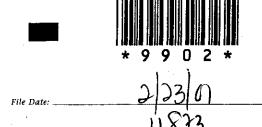
no par value

63 Treasury

Treasury

no par value

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 are true and correct. (401) 33, that all

2/21/2001

Kobert H. Mende Print or Type Name of Officer

Secretary, Treasurer

Form 630 12/00

Title of Officer

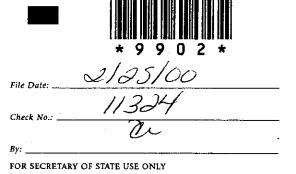


James R. Langevin, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

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



(FORM MUST BE TYPED IN BLA	ACK)				
1. Corporate ID No.	2. Name of Corpora	tion	The control of the section of the se		
9902	AUGUST W.	MENDE, INC.			
3. Street Address Principal Business	Office	· · · · · · · · ·	City	State	Zip
235 Chalkstone	Avenue		Providence	R.I.	02908
4. Business Phone No.		5. State of Incorporation			6. SIC Code
(401) 3315484		RHODE ISLAN	D		414
7. Brief Description of the Character					
Woodworking, G		T		<u> </u>	
8. NAMES AND ADDRES President Name	SES OF THE OFFI	CERS ("X" BOX FOR ATTAC	CHMENT) FILL IN SPACES   Vice President Name	BEFORE USING ATTACH	MENTS
Shirley V. Mer	nde		vice Frestaent Name		
Street Address	140		Street Address		
12 Bigelow Roa	ьđ				
City Digerow Roa	State	Zip	City	State	Zip
Johnston	R.I.	02919	,		•
Secretary Name			Treasurer Name	•	
Robert H. Mend	le		Robert H, Me	ende	
Street Address			Street Address		
12 Bigelow Roa	ıđ		12 Bigelow F	Road	
City	State	Zip	City	State	Zip
Johnston	R.I.	02919	Johnston	R.I.	02919
· · · · · · · · · · · · · · · · · · ·	SES OF THE DIRE	CTORS ("X" BOX FOR AT	FILL IN SPACE	S BEFORE USING ATTAC	HMENTS
Director Name	_		Director Name		
Robert H. Mend	le		Susan Pagliar	:o	
Street Address 12 Bigelow Roa	ıđ		Street Address		
City	State	Zip	22 Mowry Aven	State	
Johnston	R.I.	<sup>24</sup> 02919	Johnston	R.I.	<sup>Zip</sup> 02919
Director Name		and the second second second	Director Name		
Shirley V. Men	ıde		2-1/2010/ Italiic		
Street Address			Street Address		
12 Bigelow Roa	d				
City	State	Zip	City	State	Zip
Johnston	R.I.	02919			
10. SHARES AUTHORIZED	the state of the s	CHMENT)	11. SHARES ISSUED (*	X" BOX FOR ATTACHMENT)	
AUTHORIZED SHARES			ISSUED SHARES	en enter de la company de la	** **
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
600 SHS NO PAR CO	) M		102	Common	no par valu
	-		63	Man a	
* + x = +			63	Treasuary	no par valu
fhis report must be <b>sign</b> e	<b>ed in ink</b> by eith	er the President, Vice	President, Secretary, Assis	tant Secretary, Treasure	er, Receiver or Trustee



Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and d correct.

that all statements contained berein

Date Robert H. Mende, Treasurer

Print or Type Name of Officer

Treasurer

Title of Officer

2/23/2000



Jumes R. Lungevin, 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

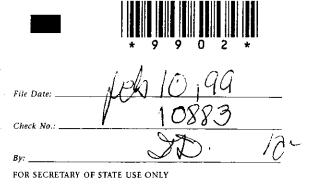


(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. <b>9902</b>	2. Name of Corpor	w. MENDE, INC.	•		· · · · · · · · · · · · · · · · · · ·
3. Street Address Principal Busin			City	State	Zip
235 Chalkstor	ne Avenue		Providence	Rhode Islan	ıd 02908
4. Business Phone No.		5. State of Incorporation RHODE ISLAN	D		6. SIC Code <b>414</b>
401 331 5484  7. Brief Description of the Chard	acter of Business Conducted				414
Woodworking,	general car	pentry			
8. NAMES AND ADDR	ESSES OF THE OFF	FICERS ("X" BOX FOR ATTACE		FORE USING ATTACH	MENTS
			Vice President Name		
Shirley V. Me	ende		Street Address		
1? Bigelow Ro	1		Street Madress		
City	State	Zip	City	State	Zìp
Johnston	R.I.	02919	,		**
Secretary Name			Treasurer Name		
Robert H. Men	ıde		Robert H. Mende	9	
Street Address	_		Street Address		
12 Bigelow Ro			12 Bigelow Road	ī	
City	State	Zip	City	State	Zip
Johnston	R.I.	02919	Johnston	R.I.	02919
9. NAMES AND ADDR. Director Name	ESSES OF THE DIR	ECTORS ("X" BOX FOR ATTA	CHMENT) FILL IN SPACES I  Director Name	BEFORE USING ATTAC	HMENTS
Robert H. Mend	ie.		Susan Pagliaro		•
Street Address	. •		Street Address		
12 Bigelow Ro	ad		22 Mowry Avenue		
City	State	Zip	City	= State	Zip
Johnston	R.I.	02919	Johnston	R.I.	02919
Director Name			Director Name		
Shirley V. Me	nde				
Street Address 12 Bigelow Ro	- d		Street Address		-
£		71.			
Johnston	State R.I.	<sup>Zip</sup> 02919	City	State	Zip
10. SHARES AUTHORIZ			11 CHADEC ICCLED (4V)	DOY FOR APPLICATIONS	
AUTHORIZED SHARES 600	LD (X BOX FOR ATT	ACHM/EN ()	11. SHARES ISSUED ("X" . ISSUED SHARES	BUX FUR AI IACHMENT)	
Number of Shares	Class/SeriesC OMI	mon Par Value no par	Number of Shares	Class/Series	Par Value
600 SHS NO PAR		value	102	Common	each no par
THE THE USE OF THE			63	Treasuery	value
				<i></i> 1	

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

Title of Officer



	Under penalty of perjury, I declare and affirm that I have examined
	this report, including any accompanying schedules and statements, and
	that all statements charged herein are true and corner
	1 1 1 1 2/8/99
-	Signature of Officer Date
1	Robert H. Mende Print or Type Name of Officer
ļ	Secretary, Treasurer

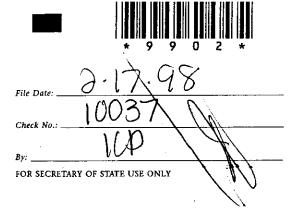


James K. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-277-3040

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



2. Name of Corporation				•
	MENDE, INC.			
				2ip
venue	5. State of Incorporation	Providence	K.I.	02908 6. SIC Code
	RHODE ISLAND			0414
Business Conducted in	Rhode Island	•		
eneral Car	pentry			
S OF THE OFFIC	CERS ("X" BOX FOR ATTACH	MENT) Vice President Name		
2		None		
ī.		Street Address		
State	Zip	City	State	Zip
R.I.	02919			
		Treasurer Name		
;		Robert H. Mend	le	
		12 Bigelow Ro	ad	
State	Zip	City	State	Zip
R.I. S OF THE DIREC	02919 CTORS ("X" BOX FOR ATTA	Johnston CHMENT) Director Name	R.I.	02919
		Shirley V. Me	ende	
i		12 Bigelow Ro	ad	
State D T	<sup>Zip</sup> ∩2919	City	State	Zip
1	02515	-	K.1.	02919
				•
State	Zip	City	State	Zip
R.I.	02919			
("X" BOX FOR ATTAC	CHMENT)	11. SHARES ISSUED ("X	" BOX FOR ATTACHMENT)	
		ISSUED SHARES		
Class/Series Com	monar Value no par	Number of Shares	Class/Series -	Par Value
		102	Common	no par value
	AUGUST W.  fice  Avenue  Business Conducted in eneral Car  S OF THE OFFICE  State  R.I.  S OF THE DIRECT  State  R.I.  State  R.I.  State  R.I.  State  R.I.	AUGUST W. MENDE, INC.  fice  Avenue  S. State of Incorporation RHODE ISLAND  Business Conducted in Rhode Island eneral Carpentry S OF THE OFFICERS ("X" BOX FOR ATTACH  State  Zip R.I. 02919  State  State  Zip R.I. 02919  State  State  Zip R.I. 02919  State  Zip R.I. 02919  State  Xiate  Zip R.I. 02919  State  State  Zip R.I. 02919  State  Xiate R.I. 02919  Class/Series Commorpar Value no par	AUGUST W. MENDE, INC.  fice City Avenue Providence  5. State of Incorporation RHODE ISLAND  Business Conducted in Rhode Island eneral Carpentry  S OF THE OFFICERS ("X" BOX FOR ATTACHMENT)  Vice President Name  None  Street Address  State Zip City  R.I. 02919  Freasurer Name  Robert H. Meno Street Address  12 Bigelow Ro  State Zip City  R.I. 02919  Sof THE DIRECTORS ("X" BOX FOR ATTACHMENT)  Director Name  Shirley V. Me Street Address  12 Bigelow Ro  City  R.I. 02919  State Zip Johnston  Director Name  Shirley V. Me Street Address  12 Bigelow Ro  City  R.I. 02919  State Zip Johnston  Director Name  None  Street Address  11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)  11. SHARES ISSUED ("X BURD SHARES  Class/Series Commorpar Value no par Number of Shares	AUGUST W. MENDE, INC.  fice  Avenue  S. State of Incorporation RHODE ISLAND  Business Conducted in Rhode Island eneral Carpentry S OF THE OFFICERS ("X" BOX FOR ATTACHMENT)  State  R.I. 02919  Treasurer Name RODert H. Mende Street Address  12 Bigelow Road State  R.I. 02919  State  R.I. 02919  Fresident Name Robert H. Mende Street Address  12 Bigelow Road City  R.I. 02919  State  State  State  Shirley V. Mende Street Address  12 Bigelow Road City  R.I. 02919  Johnston R.I. State  State  Johnston R.I. State  State  Johnston R.I. State  City  R.I. 02919  Treasurer Name Robert H. Mende Street Address  12 Bigelow Road City  R.I. State  Shirley V. Mende Street Address  12 Bigelow Road City  R.I. O2919  Johnston R.I.  State  Tohnston Director Name None Street Address  None Street Address  State  I. SHARES ISSUED ("X" BOX FOR ATTACHMENT) INSUED SHARES Class/Series  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 have place true and correct

that all sufteming Contained holding are true and correct

2/12/98
Manature of Officer Date

Robert H. Mende, Sec. Trea.

Print or Type Name of Officer

Secretary Treasurer
Title of Officer

Form 31 12/96



jumes 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

9902

AUGUST W. MENDE, INC.

3. Street Address Principal Business Office City State 235 Chalkstone Avenue Providence R.I. 02908 4. Business Phone No. 5. State of Incorporation 6. SIC Code RHODE ISLAND 401 331 5484 0414

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

Woodworking, General Carpentry

8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) President Name

Vice President Name Shirley V. Mende none

Street Address Street Address

12 Bigelow Road City

State Johnston R.I. 02919

Secretary Name Treasurer Name Robert H. Mende

Robert H. Mende Street Address Street Address 12 Bigelow Road 12 Bigelow Road

Johnston 02919 R.I. Johnston R.I. 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT)

Director Name

Susan Pagliaro Robert H. Mende

Street Address

Street Address 12 Bigelow Road

22 Mowry Avenue State State

Johnston R.I. Johnston R.I. 02919 Director Name Director Name

Shirley V. Mende none (no other) Street Address

12 Bigelow Road State

State

Johnston R.I. 02919 10. SHARES AUTHORIZED AND ISSUED ("X" BOX FOR ATTACHMENT)

AUTHORIZED SHARES ISSUED SHARES

Number of Shares Class/Series Number of Shares

600 SHS NO PAR COM 102

Common none

> 63 Treasury none

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 Actuding any accompanying schedules and statements, and

2/24/97

State

Robert H. Mende

Print or Type Name of Officer Secretary, Treasurer

Title of Officer

File Date:

FOR SECRETARY OF STATE USE ONLY

#### PRUFII GURPURALIUN **ANNUAL REPORT**

1996



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

Venue	W. MENDE, INC.  5. STATE OF INCORPORATION  RHODE IS	om Providence	state R.I.	ZIP CODE
Venue	5. STATE OF INCORPORATION			
ss conducted in Rhode isl				
ss conducted in Rhode isl		T.T.O.A.T.G.E.I.C.E.	·	02908
	RHODE IS			6. sic cobe
		LAND		0414
	AND	en a village et en en en eller et en eller et en eller et en		0.12-1
ERAL CARP	ENTRY			
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		VÍCE PRESIDENT NAME		n i i an ann an
and the section of th	en de la companya de argumenta y los que desenvolve e demon	STREET ADDRESS		the contraction will be seen to be an apply
	ZIP CODE	CITY	STATE	ZIP CODE
K.I.	. U4919 	TREASURER NAME	ra nombro di arang di Solo di Solo da Ale	and one are the more than
and the second s		Robert H. Mei	NEW TO A COMMISSION OF THE STATE OF THE STAT	le transcourant or a measurement of community and page of the set is
		12 Bigelow Ro	oad	
				ZIP CODE
		JONNSTON,	K.L.	
		DIRECTOR NAME		<u> </u>
y management and the second of	errere, er samba Ferr aksallskillikkels allti, allt skrivtelskassa verestantskillik		ende	n vina arma din mini ambanda an amandin 1 da majangga Salah (Salah 1 kabada ada din salah kabada salah salah s
		i	her.	
NTE .	ZIP CODE	CITY BIGETOW R	STATE	ZIP CODE
R.I.	02919	Johnston,	R.I.	02919
		DIRECTOR NAME		
<u> </u>	A STATE OF THE STATE OF PRINCIPLE AND ADMINISTRATION OF THE PRINCI	STREET ADDRESS	enter en a seu deux deux de seguir par que de enternéen en l'anne en le construir de des enternéen de la financia del la financia de la finan	e autre man i i i i i i ancerti i i i i i i i i i i i i i i i i i i
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CLASS / SERIES	PAR VALUE	NUMBER OF SHARES	CLASS / SERIES	PAR VALUE
600 SHS NO PAR COM		102	Common	no par valu
		63	Treasury	no par valu
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e course conferences from a second such as	renen is ben ribide, und a ner 'enn vie slave slave, and likelar) menin is an animisellarism	Bandon (Marcolore - Motals for der Mote (1974) — Allahar er de destruktion bestämmen etwanskale (1984)	the state of the contract of t	Exercise source and reserve and a service of the se
t, Vice Presider	it, Secretary, Assista	ant Secretary, Treasurer, I	Receiver or Truste	e
		Under penalty of	perjury, I deckare and	affirm that I have examine ledules and statements, ar
	R.I.  R.I.  1.0 SH  HORIZED SHARES CLASS/SERIES  C COM	R.I. 02919  S. NAMES AND ADDR  S. NAMES AND ADDR  R.I. 02919  O 2P CODE  R.I. 02919  This report must be SIGI	R.I. 02919  TREASURER NAME  ROBERT H. Mei  STREET ADDRESS  12 Bigelow Ro  CITY  R.I. 02919  Johnston,  9. NAMES AND ADDRESSES OF THE DIR  DIRECTOR NAME  Shirley V. Me  STREET ADDRESS  12 Bigelow Ro  CITY  R.I. 02919  Johnston,  DIRECTOR NAME  STREET ADDRESS  12 Bigelow Ro  CITY  R.I. 02919  Johnston,  DIRECTOR NAME  STREET ADDRESS  12 Bigelow Ro  CITY  R.I. 02919  10. SHARES AUTHORIZED AND ISSUED  HORIZED SHARES  CLASS/SERIES PARVALUE NUMBER OF SHARES  CLASS/SERIES PARVALUE NUMBER OF SHARES  CLASS/SERIES PARVALUE NUMBER OF SHARES  CLOM 102  63  This report must be SIGNED IN INK by either the tot, Vice President, Secretary, Assistant Secretary, Treasurer, I Under penalty of report, including a	R.I. 02919  TREASURER NAME  Robert H. Mende STREET ADDRESS  12 Bigelow Road COTY  R.I. 02919  Johnston, R.I.  9. NAMES AND ADDRESSES OF THE DIRECTORS DRECTOR NAME Shirley V. Mende STREET ADDRESS  12 Bigelow Road COTY  R.I. 02919  Johnston, R.I.  DIRECTOR NAME  STATE  OO  STREET ADDRESS  12 Bigelow Road COTY  R.I. 02919  Johnston, R.I. DIRECTOR NAME  OO  STREET ADDRESS  STREET ADDRESS  ISSUED SHARES CLASS / SERIES  PARVALUE  NUMBER OF SHARES CLASS / SERIES  ROM  102 Common

File Date:

Check No: By: ....

For Secretary of State Use Only

Robert H. Mende Print or Type Name of Officer

Signature of Officer

Secretary, Treasurer

Title of Officer

Date FORM 31 12/95

**DETACH BOTTOM BEFORE RETURNING** 

Sta of Rhode Island and Providence Plantations

Office of The Secretary of State

100 North Main Street

Providence, Rhode Island 02903-1335 401-277-3040

ANNUAL REPORT

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

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

Corporate ID:			Annual Report	for the year:	1995			
Name of Corporation:	AUGUST W. MEI	NDE, INC.	Ī	<b>,</b>	. , , ,			
Business entity organized under the l	aws of the State of: Rho	de Island	l Business En	stity is (check one):				
For foreign entity, address and teleph				ess Corporation (See	RIGL Chan	ter 7-1.1)		
				[ ] Professional Service Corporation (See RIGL Chapter 7-5.1)				
			. ,				, 5.1,	
Phone: (401)-331-5484		No. 1995		ent of the character		conducted in R L carper		
Address and telephone of the principa	al office of business entity i	in Rhode			with a wind with we to the		. 🛥 🚐	
Island (Provide street address - Not P 235 Chalkstone Av	O. Box);							
Providence, Rhode	9 02908		en same and a	A CONTRACTOR OF THE STATE OF TH	e e e e e e e e e e e e e e e e e e e			
Phone: (401) 331 5484								
	тиг	NAMES OF T	HE OFFICERS	ADE.				
PRESIDENT	THE	STREET AD		CITY/S	TATE		ZIP CODE	
Shirley V. Mende	12	Bigelow	Road	Johnston,	Rhođe	Island	02919	
VICE PRESIDENT		STREET AD	DRESS	CITY/S	TATE		ZIP CODE	
SECRETARY		STREET AD	DRESS	CITY/S	TATE		ŽIP CODE	
Robert H. Mende	12	Bigelow	Road	Johnston,	Rhođe	Island	02919	
TREASURER		STREET AD	DRESS	CITY/S	TATE	<del></del>	ZIP CODE	
Robert H. Mende	12	Bigelow	Road	Johnston,	Rhode	Island	02919	
NAME	THE N		IE DIRECTORS					
_	1.0	STREET AD		CITY/S		<del>-</del> 1 7	ZIP CODE	
Robert H. Mende	12_	Bigelow STREET AD		Johnston,	<u> </u>	Island		
Shirley V. Mende	12	Bigelow		Johnston,		Teland	ZIP CODE	
NAME	12	STREET AD		CITY/S			ZIP CODE	
Susan Pagliaro	22	Mowry St	reet	Johnston,		Tsland		
		110.117 00			<del></del>			
NUMBER OF SHARES AUTHORIZED	(Rider may be attached)	·	NUMBER OF SH	HARES ISSUED AND	OUTSTAND	ING (Rider may	y be attached)	
Number of Shares Cla	ss / Series		Number of Shar	es Clas	ss / Series			
600 Co	ommon no pa	ar value	102	C	ommon	no pa	r value	
			63	T	reasury	n0 pa	r value	
					_			
Date February 16,	, 19_95	By:		Kirley &	/. \\	Jende	e/	
		Shir	ley V. Men	nue			_	
Form 31 1/95		<u>Pres</u>	IGENT FICER SIGNING					
	DESIGNATED REGI	ISTERED AGI	ENT FOR SERV	VICE OF PROC	FSS.			
PLEASE NOTE: If the registered off		·			<u> </u>			

ROBERT H. MENDE 235 CHALKSTONE AVENUE PROVIDENCE RI 02908

## Fil = \$50.00 Payable to: Secretary of State

File Annually LLC: Sept. 1 - Nov. 1 CORP: Jan. 1 - March 1

1994

# PLEASE TYPE or PRINT 7448 76. State of Rhode Island and Providence Plantations Office of The Secretary of State

0009902

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

Corporate ID:		Annual R	eport for the yea	r:		
Name of Business Entity:		ΔL	IGUST W. M	ENDE,	INC.	
Rhode T	eland	Busir	ness Entity is (chec	k one):		
Business entity organized under the laws of the State of: Rhode I	Siana		下 ] Business Co	proporation (S	See RIGL Chap	ter 7-1.1)
Federal Taxpayer Identification Number:  For foreign entity, address and telephone number of principal office:				Service Co	rporation (See	RIGL Chapter 7-5.1)
		Name	e, title and mailing	address of c	ontact person to	o whom
			nunications may be		C +	
			obert H. M 35 Chalkst			<u></u>
Phone: ( )						02000
THORE.		_ 11	covidence,	Rilode	ISTANG	02908
Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):	e					
August W. Mende Inc.			statement of the choodworking			ted in Rhode Island:
235 Chalkstone Avenue			Odworking	, 00110	rar car	Jenery .
Providence, Rhode Island 02908		Date	of Organization:	Decemb	er 31, 1	L958
Phone: (401) 331 5484			-	do business	in Rhode Islan	d (if foreign entity):
Phone: (401) 331 3484	_	Date	or Quantication to	do busiliess	III KIIOGC ISIAI	u (ii foreigh chary).
☐ CHIEF EXECUTIVE OFFICER OR PRESIDENT (Check One)	STREET ADDR	E OFFIC	CERS ARE:	CITY/STATE		ZIP CODE
Shirley V. Mende 12 Bigelo			Johnston,	Rhode	Island	02919
☐ CHIEF OPERATING OFFICER OR ☐ VICE PRESIDENT (Check One)	STREET ADDR	ESS		CITY/STATE		ZIP CODE
CUSTODIAN OF RECORDS OR  SECRETARY (Check One)	STREET ADDR	ESS		CITY/STATE		ZIP CODE
Robert H. Mende 12 Bigelo			Johnston,		Island	02919
Chief Financial Officer on A Treasurer (Check One)  Robert H. Mende 12 Bigelor	STREET ADDR		Johnston,	CITY/STATE Rhode	Island	zip cone 02919
THE NAMES	OF THE	DIREC	•		IDIAMA	
	STREET ADDR		Tab mates	CITY/STATE	7-12	ZIP CODE
Robert H. Mende 12 Bigelow	STREET ADDRI		Johnston,	CITY/STATE	Island	02919 ZIP CODE
Shirley V. Mende 12 Bigelor	w Road		Johnston,		Island	02919
	STREET ADDR		Tohnoton	CITY/STATE	Taland	ZIP CODE 0 ? 9 1 9
Susan Pagliaro 22 Mowry S			Johnston,	****	*	
NUMBER OF SHARES AUTHORIZED (If Applicable)		NUMBEI	R OF SHARES ISS	<u>UED AND</u>	OUTSTANDI	NG (If Applicable)
NUMBER 600		NUMBEI	102		63	
CLASS Common		CLASS	Common		Treasur	У
SERIES	1	SERIES				
DAR WALLE OR	į.		par value	<b>≘</b>	no par	value
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		( )n/	1117/12/	_/		-
Date January 25, 19 94	By:	hl	X H Dry	10		
	Bobe	ert H	. Mende FFICER SIGNING ry, Treasu			0
ī	PRINT OR TYPE	NAME OF O	FFICER SIGNING		JAN 27	fen,
:	Sec TITLE OF OFFIC	ersigning	ry, Treasu	irer S	CVC	1059
					" OFS	T.q.
DESIGNATED REGISTERED OR 1						

PLEASE NOTE: If the Corporation has changed its registered office and/or registered or resident agent, Form 9 or Form LLC 3 must be filed.

Form 31 1/85

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 0009902		Annual Report for the year 1993			
FIRST: The name	e of the corporation is	AUGUST W. MENDE, INC.			
SECOND: It is inc	corporated under the laws of	f Rhode Island			
THIRD: Characte	r of business, briefly stated,	is Woodworking, General Ca	rpentry		
Fourth: If foreign	gn corporation, address of it	s principal office			
FIFTH: Business a	address in Rhode Island <sup>2</sup>	35 Chalkstone Avenue Pro	vidence, R.I.		
SIXTH: Names an	nd addresses of its directors a		(Attach rider if necessary)		
Robert H.	Mende Director	12 Bigelow Road Johnst	on, R.I. 02919		
Shirley V.	Mende Director	12 Bigelow Road Johnst	on, R.I. 02919		
Susan Pagl	iaro Director	22 Mowry Street Johnst	on, R.I.		
Shirley V.	Mende President	12 Bigelow Road Johnst	con, R.I.		
	Vice Pres				
Robert H. 1	Mende Secretary	12 Bigelow Road Johns	ton, R.I.		
Robert H. N	· ·	10 71 1			
SEVENTH: Numbe	r of Shares authorized:		Par Value		
No. of Shares 600	Class Common	Series PAID	or statement that shares are without par value		
		FEB 1 2 1993	no par value		
Еіднтн: Number	of Shares issued:	SEC'Y OF STATE	Par Value		
No. of Shares 102 63	<sup>Class</sup> Common Treasur	Series TY	or statement that shares are without par value  no par value		
Dated 2/9/93	19 93	August W. Mende Inc. (Name of Corporation)  By Robert H. Mende	LM. h		
(Donort report ha	signed by an officer)	Title Secretary, Treasurer	J. flm/		

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

Corporate ID 9902	Annual Report for the year
FIRST: The name of the corporation is	igust W. Mende Inc.
SECOND: It is incorporated under the law	s of Rhode Island
THIRD: Character of business, briefly state	ed, is Woodworking, General Carpentry
FOURTH: If foreign corporation, address of	f its principal office.
FIFTH: Business address in Rhode Island	235 Chalkstone Avenue Providence, R.I.
SIXTH: Names and addresses of its directo	rs and officers: (Attach rider if necessary)  Office Address (including number, street, zip code)
Robert H. Mende Direct	tor 12 Bigelow Road Johnston, R.I. 02919
Shirley V. Mende Direct	tor 12 Bigelow Road Johnston, R.I. 02919
Susan Pagliaro Direct	or 22 Mowry St. Johnston, R.I.
Shirley V. Mende Presid	ent 12 Bigelow Road Johnston, R.I.
Vice F	President
Robert H. Mende Secret	ary 12 Bigelow Road Johnston, R.I.
Robert H. Mende Treass	l2 Bigelow Road Johnston, R.I.
SEVENTH: Number of Shares authorized:  No. of Shares 600 Class Comm	Par Value or statement that shares are without On Series par value
110. Of Shares 6000 Class Condition	no par value
Eіднтн: Number of Shares issued:	Pag'd & Filed FEB 27 1992 Par Value or statement that shares are without
No. of Shares 102 Class Comm	on Series shares are without par value
63 Trea	sury no par value
Dated 2/26/92 19 92	August W. Mende Inc. (Name of Corporation)
	By Robert H. Mende
(Report must be signed by an officer)	Title Secretary, Treasurer

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

Corporate ID. 9902		Annual Report for the year	ear 1991
First: The name	of the corporation isAu	gust W. Mende Inc,	
		Rhode Island	
THIRD: Character	of business, briefly stated,	is Woodworking, General Ca	arpentry
Fourth: If foreig	n corporation, address of its	s principal office	
FIFTH: Business a	ddress in Rhode Island23	35 Chalkstone Avenue Pro	ovidence, R.I.
SIXTH: Names and	l addresses of its directors a		(Attach rider if necessary)
Robert H. Mende	Director	12 Bigelow Rd. Johr	nston, R.I.
Shirley V. Mend	e Director	12 Bigelow Rd. Johr	nston, R.I.
Susan Pagliaro	Director	20 Moury St. Johnst	con, R.I.
	e President	12 Bigelow Rd. Johr	nston, R.I.
		ident	•
	Secretary		
	Treasurer		
			***************************************
	of Shares authorized:		Par Value or statement that shares are without
No. of Shares	Class Common	Series	par value no par value
Eighth: Number of	of Shares issued:		Par Value or statement that
No. of Shares	Class	Series	shares are without par value
<b>102</b> 63	Common Treasury		no par value no par value
~ 03			no par varae
Dated January 21	, 1991 19	August W. Mende Inc. (Name of Corporation)	
N		By Shirley V. Mende	July IN Jande
(Report must be	signed by an officer)	Title President	

Filing Fee \$15.00

Form 31 1/85

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

# State of Rhode Island and Frovidence Flantations Corporations division 100 North Main Street PROVIDENCE, RHODE ISLAND 02903

Corporate ID SB 05	<del>0284845</del>	•••••	Annual	Report for	the year	1990	***********
First: The nam	ne of the corporation is	s August	W. Mende	Inc.		•••••••••••••••••••••••••••••••••••••••	••••••
Second: It is in	ncorporated under the	laws ofRh	ode Islan	đ			
THIRD: Charac	ter of business, briefly	stated, is .WC	odworking	, Genera	al Conti	racting	
	eign corporation, address	=	_		02908		
FIFTH: Business	address in Rhode Isla	and					
235 Chalks	stone Avenud F	Providenc	e, Rhode	Island (	02908	*******************************	************
SIXTH: Names a	and addresses of its dire	ectors and of	-	Address (includi	ng number, stree	(Attach rider if n t, zip code)	ecessary)
Robert H. Men	de D	rirector	12 Bigelo	ow Road	Johnsto	on, R.I. (	02919
Shirley V. Men	nde D	rirector	12 Bigelo	ow Road	Johnsto	on, R.I. (	02919
Susan Pagliar	DD	irector	22 Moury	Street	Johnst	on, R.I.	***********
Shirley V. Men	nde Pr	resident	12 Bigel	ow Road	Johnsto	on, R.I.	
Robert H. Mend	de Vi	ice President	12 Bigelo	ow Road	Johnsto	on, R.I.	***********
Shirley V. Men	nde Se	ecretary	12 Bigelo	ow Road	Johnsto	n, R.I.	
Robert H. Meno	a	easurer	12 Bigelo	w Road	Johnsto	on, R.I.	
SEVENTH: Numb	per of Shares authorize	ed:				Par Value	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
No. of Shares	Class		Series			or statement that hares are without par value	
600	Common				no	par value	
Еіднтн: Numbe	er of Shares issued:					Par Value or statement that hares are without	
No. of Shares 102	Class		Series			par value	
63	Common Treasury				_	oar value	
Dated March 1,	19 90		ugust W. M	Mende Ir	nc.		
		Ву	Shirly	A	ende	•••••	•••••
(Report must l	oe signed by an officer)	Title	Presider	it			

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

Corporate ID	0009902	•••••	. Annual Rep	oort for the year1.9	59
First:	The name of the corpo	ration is	AUGUST W. ME	NDE, INC	
Second:	It is incorporated un	der the laws of	Rhode Island		
Third:	Character of business,	briefly stated, i	s Woodworking Ge	neral Carpent	ry
Fourth:	If foreign corporation	n, address of its	s principal office		
Гігтн:	Business address in Rho	ode Island	5 Chalkstone Ave	nue Providen	ce, R.I.
<b>S</b> іхтн:	Names and addresses o	f its directors a		(At	tach rider if necessary)
Robert	H. Mende	Director	12 Bigelow	Road Johnston	n, R.I.
Shirley	V. Mende	Director	12 Bigelow	Road Johnston	n, R.I.
Susan P	agliaro	Director	20 Moury S	t. Johnston,	R.I.
Shirley	V. Mende	President	12 Bigelow	Road Johnston	n, R.I.
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Vice Presi	ident		
Robert	H. Mende	Secretary	. 12 Bigelow	Road Johnstor	ı, R.I.
	H Mende	Treasurer	12 Discolore	Road Johnston	ı, R.I.
SEVENTH:	Number of Shares au	ıthorized:		or s	Par Value tatement that es are without
No. of Shar	res C	lass	Series		par value
600	Co	ommon		FALNo pa	ır value
Еіднтн:	Number of Shares issu	ed:			Par Value satement that
No. of Share	es Cl	ass	Series	O'V OF STAN	
1 <b>02</b> 63		ommon reasury		No pa	r value
Dated Febru	uary 13, 1	<b>9</b> 89	August W. Meno	le Inc.	
(Rep	port must be signed by an of	ficer)	By Shirly Title President	Mende-	

## State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION 270 WESTMINSTER MALL PROVIDENCE, RHODE ISLAND 02903

Corporate ID		Annual Report for the year			
First: The name of the cor	poration is	AUGUST Na	menge, inc.		
Second: It is incorporated	under the laws of		Shode Islan	ci	
THIRD: Character of busines	s, briefly stated, i	s Woodworking C	eneral Carpent	ry	
FOURTH: If foreign corporat	ion, address of its	principal office			
235 Chalkstone A	venue Provi	dence, Rhode Is	land 02908		
Sixth: Names and addresses	of its directors a		(Attess (including number, street, zip	ach rider if necessary)	
Robert H. Mende	Director	12 Bigelow	Rd. Johnston,	R.I. 02919	
Shirley V. Mende	Director	12 Bigelow	RdJohnston,	R.I. 02919	
Susan Pagliaro	Director	20 Moury S	t. Johnston, R	.I.	
Shirley V. Mende	President				
	Vice Presi	dent			
Robert H. Mende					
D 1	Treasurer				
SEVENTH: Number of Shares	authorized:		P	ar Value	
No. of Shares 600	Class Class-C	ommon Series	or sta shares	tement that are without ar value	
			No pa	r value	
EIGHTH: Number of Shares is	sued:	10 10 100J		ar Value	
No. of Shares	Class	Series	shares	tement that are without	
	ommon	Series	•	r value r value	
	reasury		-	r value	
ted January 28	19	August W. Mei	nde Inc.		
		(Name of Corporation)		-C 1	
		By Shirley V. N	Mende Shirly	U- Meside	
(Report must be signed by an	officer)	Title President	/		

Form 31 1/85

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

Corporate ID	9902		Annual Report for	the year 1987
First: T	The name of the corporation	on is AUG	JST W. MENDE, INC.	
Second:	It is incorporated under	the laws of	Rhode Island	
THIRD:	Character of business, brie	efly stated, is	Woodworking Genera	l Carpentry
Fourth:	If foreign corporation, ac	ddress of its pr	rincipal office	
<b>Г</b> іғтн: В	Susiness address in Rhode	Island 235	Chalkstone Avenue	Providence, R.I. 02908
Sixth: N	Varnes and addresses of its	directors and		(Attach rider if necessary)
Robert H	. Mende	. Director	12 Bigelow Road	Johnston, R.I. 02919
Shirley	V. Mende	. Director	12 Bigelow Road	Johnston, R.I. 02919
Susan Pa	gliaro	. Director	20 Moury Street	Johnston, R.I.
Shirley	V. Mende	. President	12 Bigelow Road	Johnston, R.I. 02919
		. V <del>ice Preside</del>	nt	
Seeretar	y-Treasurer —	Secretary		
Robert H	. Mende	Treasurer	12 Bigelow Road	d Johnston, R.I. 02919
Seventh:	Number of Shares autho	rized:		Par Value
No. of Shares	Class		Series	or statement that shares are without par value
600	Common			no par value
			End for & B. Come	
Еіднтн: 1	Number of Shares issued:	17.	N 29 1987	Par Value or statement that
No. of Shares	Class	SECTY.	OF STA Series	shares are without par value
102	Common			no par value.
63	Treasu		_	no par value
Dated Januar	ry 22, 19		August W. Mende Inc	
			Shirley V. Mende	Livry To Vand.
(Repo	rt must be signed by an officer)	-	tle President	

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

# State of Phode Island and Providence Plantations Corporations division 270 WESTMINSTER MALL PROVIDENCE, RHODE ISLAND 02903

Corporate ID 9902		Annual Report fo	r the year 1986
First: The name of	of the corporation isAu		
Second: It is inco	rporated under the laws of		
THIRD: Character	of business, briefly stated, is	S Woodworking Gener	cal Carpentry
FOURTH: If foreign	corporation, address of its	principal office	
FIFTH: Business ad	dress in Rhode Island2	35 Chalkstone Ave I	Prov.,R.I.
SIXTH: Names and	addresses of its directors ar Offiœ		(Attach rider if necessary)
Robert H. Me	nde Director	12 Bigelow Rd.	Johnston, R.I. 02919
Shirley V. M	ende Director	12 Bigelow Rd.	J ohnston, R.I. 02919
Susan Paglia:	Director	20 Moury St. 3	Johnston, R.I.
Shirley V. Me	ende President	12 Bigelow Rd.	Johnston, R.I.
	Vice Presid	dent	
Robert H. Men			Johnston, R.I.
11	Treasurer	11	
	of Shares authorized:		Par Value or statement that shares are without
No. of Shares	Class	Series	par value
600	Common	<i>986</i> /	no par value
EIGHTH: Number of	Shares issued:	4	Par Value or statement that
No. of Shares	Class	D Series	sheres are without par value
1 <b>02</b> 63	Common Treasury	<b>Ŀ</b> ļ	no par value
Dated February 28	19 <u>.86</u> <b>4</b> .	August W. Mende (Name of Corporation)	Inc.
WAPR 24	ENT'D	By Shirley V. Mende	, Shirly V. Mende
(Report must be sig	ned by an officer)	Title President	

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

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

Corporate ID9902		Annual Report for	the year 1995
First: The name of	f the corporation isAUG	lst.wmende,inc	
SECOND: It is incorp	porated under the laws of		
THIRD: Character o	f business, briefly stated, is	s Woodworking, Gere	ral Carpentry
FOURTH: If foreign	corporation, address of its	principal office	
Fifth: Business add	ress in Rhode Island	35 Chalkstone Ave.,	Providence, R.I.
SIXTH: Names and a	addresses of its directors an		(Attach rider if necessary)
Robert H. Me	nde Director	12 Bigelow Rd., J	ohnston, R.I.
Shirley V. M	ende Director	12 Bigelow Rd., J	ohnston, R.I.
Susan Paglia:	ro Director	20 Maury St. , J	ohnston, R.I.
Shirley V. Mo	ende President	12 Bigelow Rd., J	ohnston, R.I.
	Vice Presi	1	
Robert H. Mer		12 Bigelow Rd., Jo	
Robert H. Mer	Societal y	12 Bigelow Rd., Jo	
SEVENTH: Number o			***************************************
No. of Shares	Class	Series	Par Value or statement that shares are without par value
600	Common		no par value
Eighth: Number of	Shares issued:		Par Value or statement that
No. of Shares	Class	Series	shares are without par value
102 63	Common Treasury		no par value
	-	7	no par value
Dated February 21  ▶ BBCBIV 11	1444	August W. Mende Inc (Name of Corporation)  By	The same of the sa
(Report must be sign	ned by an officer)	Title the lu	

Filing fee: \$15.00

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

### State of Rhode Island and Providence Plantations OFFICE OF THE SECRETARY OF STATE

		Annual Report for t	he year 1983
FIRST: The na	me of the corporation	n is	
	incorporated under t		
THIRD: Charac	cter of business, briefl	y stated, is	
	-7 Tay - 3		
FOURTH: If fo	oreign corporation, a	ddress of its principa	l office
Fifth: Busine	ss address in Rhode	Island (blank report	s will be mailed to this
address) 235 Cha	lkstone Avenue	Providence, Rhod	e Island 02908
SIXTH: Names	and addresses of its	directors and office	rs:
(Addre	sses must include street	and number, if any)	
Name	Office		Address
Robert H. Mende		12 Bigelow Ro	d. Johnston, R.I.
Shirley V. Mende		12 Bigelow Ro	oad, Johnston, R.I.
Susan Pagliaro	Director	22 Moury St.	, Johnston, R.I.
Shirley V. Mende	President	***************************************	l., Johnston, R.I.
Robert H. Mende,	Vice Presid	dent 12 Bigelow Rd	l., Johnston, R.I.
Shirley V. Mende	Secretary		., Johnston, R.I.
Robert H. Mende (If additional space is n	Treasurer eeded, attach rider)	12 Bigelow Rd	., Johnston, R.I.
SEVENTH: Num	ber of Shares author	rized:	Par Value
No. of Shares	Class	Series	or statement that shares are without par value
165	Common		No par value
Eighth: Numbe	er of Shares issued:		Par Value or statement that
No. of Shares	Class	Series	shares are without par value
102	1 20 Common = 5 84		No par value
Dated: January 2	4 19.84	August W. Me	
		By Shirley 17	Menle
		litle Président,	
		(Report must be sign	gned by an officer)
· · · · · · · · · · · · · · · · · · ·			

If the corporation has changed its registered office and/or its registered agent, Form #9 must be filed. Please contact Corporation Division for information. 277-3040

Filing fee: \$15.00

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

### State of Rhode Island and Providence Plantations OFFICE OF THE SECRETARY OF STATE

SECOND: It is incorporated under the laws of Rhode Island THED: Character of business, briefly stated, is Woodworking and General Contracting FOURTH: If foreign corporation, address of its principal office  FIFTH: Business address in Rhode Island (blank reports will be mailed to this address) 235 Chalkstone Avenue Providence, Rhode Island 02908  SIXTH: Names and addresses of its directors and officers:  [Addresses must include street and number, if any)]  Name Office Address  Robert H. Mende Director 12 Bigelow Rd. Johnston, R.I. Shirley V. Mende Director 12 Bigelow Rd. Johnston, R.I.  Susan Pagliaro Director 22 Mowrey St. Johnston, R.I.  Robert H. Mende President 12 Bigelow Rd. Johnston, R.I.  Vice President  Shirley V. Mende Secretary 12 Bigelow Rd. Johnston, R.I.  Vice President  Shirley V. Mende Secretary 12 Bigelow Rd. Johnston, R.I.  SEVENTH: Number of Shares authorized:  No. of Shares  Class  Class  Class  Class  GOO Common  Treasurer  Class  Series  Se	First: The nam		Annual Report for the Sangust W. Men	e year 198
FOURTH: If foreign corporation, address of its principal office  FIFTH: Business address in Rhode Island (blank reports will be mailed to this address) 235 Chalkstone Avenue Providence, Rhode Island 02908  SIXTH: Names and addresses of its directors and officers:  (Addresses must include street and number, if any)  Name Office  Robert H. Mende Director 12 Bigelow Rd. Johnston, R.I.  Shirley V. Mende Director 12 Bigelow Rd. Johnston, R.I.  Susan Pagliaro Director 22 Mowrey St. Johnston, R.I.  Vice President  Shirley V. Mende President 12 Bigelow Rd. Johnston, R.I.  Vice President  Shirley V. Mende Secretary 12 Bigelow Rd. Johnston, R.I.  Wice President  Shirley V. Mende Treasurer  (If additional space is needed, attach rider)  SEVENTH: Number of Shares authorized:  No. of Shares Class  600 Common  Far Value  Or statement that change of statement that change is	SECOND: It is in	corporated under the	laws of Rhode I	sland
FIFTH: Business address in Rhode Island (blank reports will be mailed to this address) 235 Chalkstone Avenue Providence, Rhode Island 02908  SIXTH: Names and addresses of its directors and officers:  [Addresses must include street and number, if any]  Name Office Address  Robert H. Mende Director 12 Bigelow Rd. Johnston, R.I.  Shirley V. Mende Director 22 Mowrey St. Johnston, R.I.  Susan Pagliaro Director 22 Mowrey St. Johnston, R.I.  Robert H. Mende President 12 Bigelow Rd. Johnston, R.I.  Vice President  Shirley V. Mende Secretary 12 Bigelow Rd. Johnston, R.I.  Robert H. Mende Treasurer 12 Bigelow Rd. Johnston, R.I.  Robert H. Mende Treasurer 12 Bigelow Rd. Johnston, R.I.  Robert H. Mende Treasurer 12 Bigelow Rd. Johnston, R.I.  SEVENTH: Number of Shares authorized:  No. of Shares Class  Goo Common Robert Value  Far Value or statement that shares are without par value  Far Value  Or statement that shares are without par value  Treasury stock 53  August W Mande Inc.  Ry President  (Rieport must be signed by an officer)  If the corporation has changed its registered of the conforced agent.			stated, is Woodwork	ing and General
Address) 235 Chalkstone Avenue Providence, Rhode Island 02908.  SIXTH: Names and addresses of its directors and officers:  [(Addresses must include street and number, if any)]  Name Office Address  Robert H. Mende Director 12 Bigelow Rd. Johnston, R.I.  Susan Pagliaro Director 22 Mowrey St. Johnston, R.I.  Robert H. Mende President 12 Bigelow Rd. Johnston, R.I.  Vice President  Shirley V. Mende Secretary 12 Bigelow Rd. Johnston, R.I.  Robert H. Mende Treasurer 12 Bigelow Rd. Johnston, R.I.  Robert H. Mende Treasurer 12 Bigelow Rd. Johnston, R.I.  Robert H. Mende Treasurer 12 Bigelow Rd. Johnston, R.I.  SEVENTH: Number of Shares authorized:  No. of Shares Class Series Par Value or Far V	FOURTH: If fore	oign corporation, add	ress of its principal	office
SIXTH: Names and addresses of its directors and officers:  (Addresses must include street and number, if any)  Name Office Robert H. Mende Director Shirley V. Mende Director Susan Pagliaro Director Robert H. Mende President Shirley V. Mende President Shirley V. Mende Secretary Shirley V. Mende Secretary Robert H. Mende Treasurer (If additional space is needed, attach rider)  SEVENTH: Number of Shares authorized: No. of Shares Class Class Common Right Series Series Series Series Series Par Value or statement that shares are without par value for stateme	FIFTH: Business	address in Rhode Is	land (blank reports	will be mailed to this
Name Office Address  Robert H. Mende Director 12 Bigelow Rd. Johnston, R.I. Shirley V. Mende Director 12 Bigelow Rd. Johnston, R.I. Susan Pagliaro Director 22 Mowrey St. Johnston, R.I. Robert H. Mende President 12 Bigelow Rd. Johnston, R.I.  Vice President 12 Bigelow Rd. Johnston, R.I.  Wice President 12 Bigelow Rd. Johnston, R.I.  Shirley V. Mende Secretary 12 Bigelow Rd. Johnston, R.I.  Robert H. Mende Treasurer (If additional space is needed, attach rider)  SEVENTH: Number of Shares authorized: No. of Shares Class 600 Common Par Value  Far Value or statement that shares are without par value  Par Value or statement that shares are without par value on par value  Par Value Or Statement that shares are without par value Age Treasury stock 23 no par value  Par Value Or Statement that shares are without par value	address) 235 Chal	kstone Avenue P	rovidence. Rhode	= Island 02908
Robert H. Mende Director 12 Bigelow Rd. Johnston, R.I.  Shirley V. Mende Director 12 Bigelow Rd. Johnston, R.I.  Susan Pagliaro Director 22 Mowrey St. Johnston, R.I.  Robert H. Mende President 12 Bigelow Rd. Johnston, R.I.  Vice President 12 Bigelow Rd. Johnston, R.I.  Shirley V. Mende Secretary 12 Bigelow Rd. Johnston, R.I.  Robert H. Mende Treasurer (If additional space is needed, attach rider)  SEVENTH: Number of Shares authorized:  No. of Shares Class Par Value  EIGHTH: Number of Shares issued:  No. of Shares Class Series Par Value  Treasury stock Series Par Value  Par Val	Sixth: Names a	nd addresses of its d	irectors and officer	s:
Robert H. Mende Director 12 Bigelow Rd. Johnston, R.I.  Shirley V. Mende Director 12 Bigelow Rd. Johnston, R.I.  Susan Pagliaro Director 22 Mowrey St. Johnston, R.I.  Robert H. Mende President 12 Bigelow Rd. Johnston, R.I.  Vice President 12 Bigelow Rd. Johnston, R.I.  Wice President 12 Bigelow Rd. Johnston, R.I.  Robert H. Mende Treasurer (If additional space is needed, attach rider)  SEVENTH: Number of Shares authorized:  No. of Shares Class Series Par Value of statement that shares are without par value  EIGHTH: Number of Shares issued:  No. of Shares Class Series Par Value of par value  Treasury stock Sample of Common Revenue of C	(Address	es must include street an	d number, if any)	
Shirley V. Mende  Director  Susan Pagliaro  Director  Robert H. Mende  President  Vice President  Shirley V. Mende  Secretary  Robert H. Mende  Treasurer  (If additional space is needed, attach rider)  SEVENTH: Number of Shares authorized:  No. of Shares  Class  Class  Common  Common  Common  Common  Dar Value  Par Value  Par Value  Or statement that  shares are without  par value  Par Value  Or statement that  shares are without  par value  Par Value  Or statement that  shares are without  par value  Or par value  Par Value  Or statement that  shares are without  par value  Or par value	Name	Office		Address
Susan Pagliaro  Robert H. Mende  President  Vice President  Shirley V. Mende  Secretary  Robert H. Mende  Treasurer  (If additional space is needed, attach rider)  SEVENTH: Number of Shares authorized:  No. of Shares  Class  Class  Common  EIGHTH: Number of Shares issued:  No. of Shares  Class  Class  Class  Common  Treasury stock  August W. Mende  Treasury stock  Series  Dated: February 11, 19 93  August W. Mende  Name of Corporation  R. I.  12 Bigelow Rd. Johnston, R. I.  12 Bigelow Rd. Johnston, R. I.  Par Value  or statement that shares are without par value  On par value  13 Dated: February 11, 19 93  August W. Mende  Name of Corporation  Richard Treasury stock  On par value  (Report must be signed by an officer)  If the corporation has changed its registered office and/or its registered agent	Robert H. Mende	Director	12 Bigelow F	Rd. Johnston, R.I.
Susan Pagliaro  Robert H. Mende  President  Vice President  Shirley V. Mende  Secretary  Robert H. Mende  Treasurer  (If additional space is needed, attach rider)  SEVENTH: Number of Shares authorized:  No. of Shares  Class  Class  Common  EIGHTH: Number of Shares issued:  No. of Shares  Class  Class  Class  Common  Treasury stock  August W. Mende  Treasury stock  Series  Dated: February 11, 19 93  August W. Mende  Name of Corporation  R. I.  12 Bigelow Rd. Johnston, R. I.  12 Bigelow Rd. Johnston, R. I.  Par Value  or statement that shares are without par value  On par value  13 Dated: February 11, 19 93  August W. Mende  Name of Corporation  Richard Treasury stock  On par value  (Report must be signed by an officer)  If the corporation has changed its registered office and/or its registered agent	Shirley V. Mende	Director	12 Bigelow F	Rd. Johnston, R.I.
Robert H. Mende   President   12 Bigelow Rd. Johnston, R.I.			22 Mowrey St	. Johnston R I
Wice President  Shirley V. Mende Secretary 12 Bigelow Rd. Johnston, R.I.  Robert H. Mende Treasurer (If additional space is needed, attach rider)  SEVENTH: Number of Shares authorized:  No. of Shares Class Par Value or statement that shares are without par value  EIGHTH: Number of Shares issued:  No. of Shares Class Series Par Value or statement that shares are without par value  EIGHTH: Number of Shares issued:  No. of Shares Class Series Par Value or statement that shares are without par value  116 Common no par value  49 Treasury stock on par value  Dated: February 11, 19 93 August W Mende, Inc.  Name of Corporation has changed its registered of the and/or its registered agent.				
Robert H. Mende Treasurer (If additional space is needed, attach rider)  SEVENTH: Number of Shares authorized: No. of Shares Class  EIGHTH: Number of Shares issued:  No. of Shares Class  Class  EIGHTH: Number of Shares issued:  No. of Shares 12 Bigelow Rd. Johnston, R.I.  Par Value or statement that shares are without par value  or statement that shares are without par value  Par Value or statement that shares are without par value  116 Common  Par Value or statement that shares are without par value  12 Bigelow Rd. Johnston, R.I.  Par Value or statement that shares are without par value  or statement that shares are without par value  12 Bigelow Rd. Johnston, R.I.  Par Value or statement that shares are without par value  or statement that shares are without par value  No. of Shares 12 Bigelow Rd. Johnston, R.I.  Par Value or statement that shares are without par value  or stateme				***************************************
Robert H. Mende Treasurer (If additional space is needed, attach rider)  SEVENTH: Number of Shares authorized:  No. of Shares Class  EIGHTH: Number of Shares issued:  No. of Shares Class Series Par Value or statement that shares are without par value  EIGHTH: Number of Shares issued:  No. of Shares Class Series Par Value or statement that shares are without par value  116 Common 10 par value  49 Treasury stock 53 no par value  Dated: February 11, 19 93 August W Mende, Inc.  Name of Corporation  Ryange of Corporation  By President (Report must be signed by an officer)  If the corporation has changed its registered office and/or its registered agent.				
(If additional space is needed, attach rider)  SEVENTH: Number of Shares authorized:  No. of Shares  Class  Class  Common  Com		_		
No. of Shares  Class  Class  Common  Common  Common  Common  Class  Common  Com			12 bigelow R	d. Johnston, R.I.
No. of Shares  Class  Class  Common  Common  Common  Common  Class  Common  Com	SEVENTH: Numbe	er of Shares authori	zed•	Par Value
EIGHTH: Number of Shares issued:  No. of Shares  Class  Common  Common  Common  Par Value or statement that shares are without par value  116  Common  Treasury stock  August W Mende, Inc.  Name of Corporation  By  Report must be signed by an officer)  If the corporation has changed its registered or other and/or its registered agent.			FEB 1819	or statement that shares are without par value
No. of Shares  116  Common  Class  Series  Series  Series  Shares are without par value  2  10 par value  11 par value  12  13 August W Mande, Inc.  Name of Corporation  By  President  (Report must be signed by an officer)  If the corporation has changed its registered of the and/or its registered agent.	600	Common	A.	_
Dated: February 11, 19 93  Dated: February 11, 19 93  August W Mende, Inc.  (Name of Corporator)  By Operator Character of Corporator (Report must be signed by an officer)  If the corporation has changed its registered of the and/or its registered agent.	No. of Shares	Class	Series	or statement that shares are without par value
Dated: February 11, 19 93  August W Mende, Inc.  Name of Corporation  By Corporation  (Report must be signed by an officer)  If the corporation has changed its registered office and/or its registered agent.		Common	2	no par value
Dated: February 11, 19 93  August W Mende, Inc.  Name of Corporation  By Order  (Report must be signed by an officer)  If the corporation has changed its registered office and/or its registered agent.	49	Treasury stock	/ 1	no par valué
If the corporation has changed its registered office and/or its registered agent.	Dated: February 11	17	August W Mer	se, fine
If the corporation has changed its registered office and/or its registered agent		1	(Report must be sig	ned by an officer)
	If the corporation h	as changed its register	ed-office and/or its re	egistered scent

FORM 31 11-82

Filing fee: \$15.00

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

# State of Rhode Island and Providence Plantations OFFICE OF THE SECRETARY OF STATE

FIRST: The name of the corporation is August W. Mende, Inc.  SECOND: It is incorporated under the laws of Rhode Island THIRD: Character of business, briefly stated, is Woodworking, General Carpentry  FOURTH: If foreign corporation, address of its principal office  FIFTH: Business address in Rhode Island (blank reports will be mailed to this address) 235 Chalkstone Ave. Prov., R.I.  SIXTH: Names and addresses of its directors and officers:  (Addresses must include street and number, if any)  Name Office Address  Name Office Address Address Office Address O				Annual Report for	the year	1 <del>981</del> / 442
THIRD: Character of business, briefly stated, is  Woodworking, General Carpentry  FOURTH: If foreign corporation, address of its principal office  FIFTH: Business address in Rhode Island (blank reports will be mailed to this address) 235 Chalkstone Ave. Prov., R.I.  SIXTH: Names and addresses of its directors and officers:  (Addresses must include street and number, if any)  Name Office  Office Address  Name Office  Office Address  Office Add	First:	The name of t	the corporation	is August W. M	ende, Ind	3.
Woodworking, General Carpentry  FOURTH: If foreign corporation, address of its principal office  FIFTH: Business address in Rhode Island (blank reports will be mailed to this address) 235 Chalkstone Ave. Prov., R.I.  SIXTH: Names and addresses of its directors and officers:  (Addresses must include street and number, It any)  Name Office  Office Address  Addres	SECOND:	It is incorpo	orated under th	e laws of Rhode	Island	
FOURTH: If foreign corporation, address of its principal office  FIFTH: Business address in Rhode Island (blank reports will be mailed to this address) 235 Chalkstone Ave. Prov., R.I.  SIXTH: Names and addresses of its directors and officers:  (Addresses must include street and number, it any)  Name Office  Address	THIRD:			arnon-ru		
address) 235 Chalkstone Ave. Prov., R.I.  SIXTH: Names and addresses of its directors and officers:  (Addresses must include street and number, if any)  Name Office Address  Cobert H. Mende Director  Chirley V. Mende 12 Bigelow Rd. Johnston, R.I.  13 Hopkins Ave. Johnston, R.I.  14 Bigelow Rd. Johnston, R.I.  15 Hopkins Ave. Johnston, R.I.  16 Hopkins Ave. Johnston, R.I.  17 Bigelow Rd. Johnston, R.I.  18 Bigelow Rd. Johnston, R.I.  19 Bigelow Rd. Johnston, R.I.  19 Bigelow Rd. Johnston, R.I.  10 Hopkins Ave. Johnston, R.I.  11 Bigelow Rd. Johnston, R.I.  12 Bigelow Rd. Johnston, R.I.  13 Bigelow Rd. Johnston, R.I.  14 Bigelow Rd. Johnston, R.I.  15 Bigelow Rd. Johnston, R.I.  16 Bigelow Rd. Johnston, R.I.  17 Bigelow Rd. Johnston, R.I.  18 Bigelow Rd. Johnston, R.I.  19 Bigelow Rd. Johnston, R.I.  10 Hopkins Ave. Johnston, R.I.  20 Bigelow Rd. Johnston, R.I.  21 Bigelow Rd. Johnston, R.I.  22 Bigelow Rd. Johnston, R.I.  23 Bigelow Rd. Johnston, R.I.  24 Bigelow Rd. Johnston, R.I.  25 Bigelow Rd. Johnston, R.I.  26 Bigelow Rd. Johnston, R.I.  26 Bigelow Rd. Johnston, R.I.  27 Bigelow Rd. Johnston, R.I.  28 Bigelow Rd. Johnston, R.I.  28 Bigelow Rd. Johnston, R.I.  29 Bigelow Rd. Johnston, R.I.  20 Hopkins Ave. Johnston, R.I.  20 Hopkins Ave. Johnston, R.I.  20 Hopkins Ave. Johnston, R.I.  21 Bigelow Rd. Johnston, R.I.  21 Bigelow Rd. Johnston, R.I.  22 Bigelow Rd. Johnston, R.I.  28 Bigelow Rd. Johnston, R.I.  29 Bigelow Rd. Johnston, R.I.  20 Hopkins Ave. Johnston, R.I.  20 Hopkins Ave. Johnston, R.I.  20 Hopkins Ave. Johnston, R.I.  21 Bigelow Rd. Johnston, R.I.  22 Bigelow Rd. Johnston, R.I.  23 Bigelow Rd. Johnston, R.I.  24 Bigelow Rd. Johnston, R.I.  26 Bigelow Rd. Johnston, R.I.  27 Bigelow Rd. Johnston, R.I.  28 Bigelow Rd. Johnston, R.I.  29 Bigelow Rd. Johnston, R.I.  20 Hopkins Ave. Johnston, R.I.  20 Hopkins Ave. Johnston, R.I.  21 Bigelow Rd. Johnston, R.I.  22 Bigelow Rd. Johnston, R.I.  25 Bigelow Rd. Joh	Fourth:	If foreign o	corporation, ad			
SIXTH: Names and addresses of its directors and officers:  (Addresses must include street and number, if any)  Name Office Address  Cobert H. Mende Chirley V. Mende Chirley C. Bigelow Rd. Johnston, R.I. Chobert H. Mende Chirley C. Bigelow Rd. Johnston, R.I. Chirley C. Bigelow Rd. Johnston,	FIFTH:	Business addr	ress in Rhode I	sland (blank repor	ts will be	mailed to this
(Addresses must include street and number, if any)  Name Office O	address) 23	5 Chalkston	e Ave. Prov	., R.I.		
Thirley V. Mende Thirle	SIXTH:				ers:	
Thirley V. Mende Thirle	Ŋ	Vame	Office		Address	
Tobert H. Mende President 12 Bigelow Rd. Johnston, R.I.  Vice President 12 Bigelow Rd. Johnston, R.I.  Vice President 120 Hopkins Ave. Johnston, R.I.  Resident Secretary 120 Hopkins Ave. Johnston, R.I.  Robert H. Mende Treasurer 12 Bigelow Rd. Johnston, R.I.  Robert H. Mende Treasurer 12 Bigelow Rd. Johnston, R.I.  Resident Seventh: Number of Shares authorized:  No. of Shares Class Series Par Value  or statement that shares are without par value  or statemen	Shirley V. M	ende		12 Bigelo	ow Rd. Jo	hnston, R.I.
Vice President  120 Hopkins Ave. Johnston, R. I.  Seventh. Mende  Treasurer  (If additional space is needed, attach rider)  SEVENTH: Number of Shares authorized:  No. of Shares  Class  Class  Series  Par Value  or statement that shares are without par value  Par Value  Or statement that shares are without par value  Vice President  Par Value  Or statement that shares are without par value  Vice President  Par Value  Or statement that shares are without par value  Vice President  Par Value  Or statement that shares are without par value  Vice President  Par Value  Or statement that shares are without par value  Vice President  Par Value  Or statement that shares are without par value  Vice President  Par Value  Or statement that shares are without par value  Vice President  Par Value  Or statement that shares are without par value  Vice President Series  Par Value Or statement that shares are without par value  Or statement that shares are without par value  Or statement that shares are without par value  Or statement that shares are without par value  Or statement that shares are without par value  Or statement that shares are without par value  Or statement that shares are without par value  Or statement that shares are without par value  Or statement that shares are without par value  Or statement that shares are without par value  Or statement that shares are without par value  Or statement that shares are without par value  Or statement that shares are without par value  Or statement that shares are without par value  Or statement that shares are without par value  Or statement that shares are without par value  Or statement that shares are without par value  Or statement that shares are without par value  Or statement that shares are without par value  Or statement that shares are witho				120 Hopkin	ns Ave.Jo	hnston, R.I.
Class Series Par Value  Common Par Value  Class Series Par Value  Obsert H. Number of Shares authorized:  No. of Shares Class Series Par Value  Obsert H. Number of Shares authorized:  No. of Shares Class Series Par Value  Common Par Value  Par Value  Or statement that shares are without par value  Par Value  Or statement that shares are without par value  Par Value  Or Statement that shares are without par value  Or Statement that shares are without par value  Par Value  Or Statement that shares are without par value  Or Statement that shares are witho				12 Bigelo	ow Rd. Jo	ohnston, R.I.
Cobert H. Mende Treasurer 12 Bigelow Rd. Johnston, R.I.  (If additional space is needed, attach rider)  SEVENTH: Number of Shares authorized:  No. of Shares Class Series Par Value or statement that shares are without par value  Common Par Value  EIGHTH: Number of Shares issued:  No. of Shares Class Series Par Value or statement that shares are without par value  130 Common Par Value  Dated: February 16, 1982 19 August W. Mende, Inc.  (Name of Corporation)  By  Title President  (Report must be signed by an officer)	<b>*********</b>	,	Vice Preside	nt		
SEVENTH: Number of Shares authorized:  No. of Shares  Class  Series  Par Value or statement that shares are without par value  600  Common  EIGHTH: Number of Shares issued:  No. of Shares  Class  Class  Series  Par Value or statement that shares are without par value  Par Value  Of Shares issued:  No. of Shares  Class  Series  Par Value  Of Shares that shares are without par value  Par Value  Of Shares are without par value  Of Shares are without par value  August W. Mende, Inc.  (Name of Corporation)  We Mende, Inc.  (Name of Corporation)  (Report must be signed by an officer)  If the corporation has changed its registered office and/or its registered agent,	Elsie M. Bur	ghardt	Secretary	120 Hopkir	ns Ave.Jo	hnston, R.I.
No. of Shares  Class  Class  Series  Class  Class  Class  EIGHTH: Number of Shares issued:  No. of Shares  Class  Class  Class  Class  Series  Par Value  or statement that shares are without par value  or statement that shares are without par value  The Par Value  August W. Mende, Inc.  (Name of Corporation)  By  Title President  (Report must be signed by an officer)  If the corporation has changed its registered office and/or its registered agent,				12 Bigelo	ow Rđ. Jo	hnston,R.I.
No. of Shares  Class  Series  Series  Shares are without par value  Common  EIGHTH: Number of Shares issued:  No. of Shares  Class  Class  Series  Par Value or statement that shares are without par value  130  Common  2 No Par Value  2 No Par Value  30 August W. Mende, Inc.  (Name of Corporation)  By  Title President  (Report must be signed by an officer)  If the corporation has changed its registered office and/or its registered agent,	SEVENTH	: Number of	Shares authori	ized:		
EIGHTH: Number of Shares issued:  No. of Shares  Class  Class  Series  Par Value or statement that shares are without par value  130  Common  2 No Par Value  82  Dated: February 16, 1982  By  Title President  (Report must be signed by an officer)  If the corporation has changed its registered office and/or its registered agent,	No. of Shar	res	Class	Series		
EIGHTH: Number of Shares issued:  No. of Shares  Class  Class  Series  Par Value or statement that shares are without par value  130  Common  2 No Par Value  82  Dated: February 16, 1982  By  Title President  (Report must be signed by an officer)  If the corporation has changed its registered office and/or its registered agent,	600	Co	nommo	FEB 24	1962 NO 1	Par Value
No. of Shares  Class  Series  Series  Shares are without par value  2 No Par Value  2 No Par Value  3 No Par Value  3 No Par Value  4 No Par Value  5 No Par Value  6 Name of Corporation  7 Title President  (Report must be signed by an officer)  If the corporation has changed its registered office and/or its registered agent,	Еіднтн:	Number of	Shares issued:		P	ar Value
Dated: February 16, 1982 19  August W. Mende, Inc.  (Name of Corporation)  By  Title President (Report must be signed by an officer)  (f the corporation has changed its registered office and/or its registered agent,	No. of Shar	:es	Class	Series	share	s are without
Dated: February 16, 1982 19  August W. Mende, Inc.  (Name of Corporation)  By  Title President (Report must be signed by an officer)  If the corporation has changed its registered office and/or its registered agent,	130		Common		№	Par Value
If the corporation has changed its registered office and/or its registered agent, Form #9 must be filed. Please contact Corporation Division for information. 277-3040	Dated: Februa	ary 16, 1982	F	(Name of Corporation)  Sy  Litle President	82 Inde, Inc	Jen G
	If the co Form #9	rporation has ch must be filed. Plea	hanged its registe ase contact Corpo	ered office and/or its ration Division for in	s is is red for a is n. 2	agent, 77-3040

# State of Chode Island and Providence Plantations OFFICE OF THE SECRETARY OF STATE

#### ANNUAL REPORT

of

August W	. Mende, Inco	porated	,,	.,,,,,,,,,,,,,,,,
Pursuant to the provis	sions of Section 7.	1.1-118 of th	e Gene	ral Laws, 1956, as
amended, the undersigned	corporation hereb	y submits th	e follov	ving annual report:
FIRST: The name of t	the corporation is	August W	. Mend	e, Incorporated
SECOND: It is incorpo	rated under the la	ws of Rhod	e Isla	nd
THIRD: The address				
235 Chalkstone Ave.	-			
and the name of its registe				
Milton Isserlis 13				
FOURTH: If a foreig	n corporation, the	address of its	princip	al office in the state
or country under the laws	of which it is inco	rporated is		
FIFTH: The characte	a of the hydroce	in which it is	ectuall	v engaged in Rhode
Island, briefly stated, is				
Island, briefly stated, is	,			
SIXTH: The names ar	nd respective addr	aggag of its di	rectors :	and officers are:
Name	Office	esses of 105 di	COUCLE	Address
Robert H. Mende	Director	12 Bigelo	w Rd.	Johnston, R.I.
Elsie M. Burghardt	Director	120 Hopki	ns Av	e. Johnston, R.I.
John W. Burghardt	Director	120 Hopki	ns Ave	e. Johnston, R.I.
Shirley V. Mende	Director	12 Bigelo	w Rđ.	Johnston, R.I.
	Director			
	Director	***************************************		
Robert H. Mende	President	12 Bigelo	w Rd.	Johnston, R.I.
	Vice Preside	nt		
Elsie M. Burghardt	Secretary	120 Hopki	ns Ave	. Johnston, R.I.
Robert H. Mende	Treasurer	12 Bigelo	w Rd.	Johnston, R.I.
SEVENTH: The aggregatory classes, par value of share				
by classes, par varies or arrays	~, ~	· · · · · · · · · · · · · · · · · ·	,	Par Value per Share
Number of	Class	Series	4	or Statement that Shares are without Par Value
Shares	Class	Delles	200	1 al yalue
-16-			81 .	no par value
600	Common		va 🖟	no par varue
			40A	1/
			0 - 0	W
			: :	W .
			•	- 20 2 1981
Enrm 21 11 90			1 <b>5.0</b> 15.0	APK 60
Form 31 11-80			<b>5</b> .00  5.00 <b>BL</b>	
			==	

 $\label{eq:energy} \textbf{Eighth:} \quad \text{The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:}$ 

Number of Shares	Class	Series	Par Value per Share or Statement that Shares are without Par Value
130			no par value

DatedFebruary 27 ,1981

August M. Mende, Inc.

r. President

### State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

#### ANNUAL REPORT

OF

	suant to the pro the undersigned	corporation hereby s	1.1-118 of the ubmits the follo	General Laws, 1956, as
Seco	ND: It is incorp	porated under the laws	s of RHODE 1	ISLAND
Тни	RD: The address	s of its registered office	e in Rhode Island	l is
				ce R.I.
				ess is
				cipal office in the state or
	iefly stated, is	Woodwork	ing	ually engaged in Rhode
Elsie	The names and Name H. Mende Mende Burghar . Burghardt	dt Director	14 Bigelow 120 Hopkins	nd officers are: Address Rd Johnston R.I. Ave " "
	y Mende			Rd " "
			=	The state of the s
		Director		
Robert	t H. Mende	President	as above	
		Vice President	***************************************	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Robert	H. Mende	Secretary	41 91	······································
		-	20 Hopkins a	ive Johnston R.I.
SEVEN by classes,	NTH: The aggre par value of share	gate number of shares	s which it has aut value, and series,	hority to issue, itemized if any, within a class, is:  Par Value per Share or Statement that
	ber of ares	Class	3 <u>Series</u>	Shares are without Par Value
60	0	Common	eo	No Par Value
Form 31 35M 11-7	7		*c>15,00 3856∧1415,00B	MAR 7 1999

 $\label{eq:Eighth:Eigh$ 

Number of Shares	Class	Series	Par Value per Share or Statement that Shares are without Par Value
135	Common		No par value

Dated February 5, 1990

AUGUST W. MENDE, Inc.
(NAME OF CORPORATION)

By Elsie Mende Jurghardt

Its Leas -

# State of Rhode Island and Providence Plantations OFFICE OF THE SECRETARY OF STATE

#### ANNUAL REPORT

 $\mathbf{OF}$ 

AUGUST W. M	lende - Tuc.
Pursuant to the provisions of Section	7.1.1-118 of the General Laws, 1956, as
amended, the undersigned corporation hereby First: The name of the corporation is	y submits the following annual report: August W. Mende - Inc.
There is the name of the corporation is	
SECOND: It is incorporated under the la	ws of RHODE ISLAND
	fice in Rhode Island is
and the name of its registered agent in Rhode I	Island at such address is.
FOURTH: If a foreign corporation, the a country under the laws of which it is incorpora	address of its principal office in the state or
Island, briefly stated, is Wood wo	
Ctenera	L CONTRACTING
SIXTH: The names and respective addresse  Name Office John W. Burghardt Director Shirley Mende Director Yobert H. Mende Director Elsie M. Burghardt Director Director Director President Vice President Robert H. Mende Secretary Elsie Mende Burghardt Treasurer Seventh: The aggregate number of shar	120 - HOPKINS AVE JOHNSTON R.I. 14-BIGGLOW ROAD ""  120 HOPKINS AVE ""  14-BIGGLOW ROAD JOHNSTON R.I.  14-BIGGLOW ROAD "  120 HOPKINS AVE JOHNSTON "
by classes, par value of shares, shares without pa  Number of Shares Class	er value, and series, if any, within a class, is:  Par Value per Share or Statement that Shares are without Par Value
-600 - Common	79 NO PAR VALUE
orm 31 35M 11-77	MAR 5 1979  1500  1500

EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	Series	Par Value per Share or Statement that Shares are without Par Value	
135	Common		NO PAR VALUE	

Dated February 20, 1979 August W. Mende, Inc (NAME OF CORPORATION)

By Elsie Mende Burglardt

Its Zeas.

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

# State of Rhode Island and Providence Plantations OFFICE OF THE SECRETARY OF STATE

#### ANNUAL REPORT

 $\mathbf{OF}$ 

<i>بسد</i>	August	W. Mende	i hie		
Pursuant	to the provision	ons of Section 7.	1.1-118 of the	General Laws, 1956, wing annual report:	as
				Mende duc!	······
SECOND:	It is incorpora	ted under the laws	of Rho	de Island	•••••
THIRD:	The address of i	ts registered office	in Rhode Islan		euce)
and the name o	f its registered a		and at such add	ress is	
Fourth:			_	cipal office in the state	or
				tually engaged in Rho	
Island, briefly		Graduo		<i>+</i> •	
***************************************	************************************	General	course	S.S.	••••
		***************************************			
( )	Tame	ective addresses o	f its directors a	Address	
shwW (	Burglearet	Director	120 Ita	phies are X	huston
Shirle	Munde	Director	14- 6	indow Road	/ "
<i>'</i>	,	Director		O .	****
		Director	***************************************		
		Director	***************************************		••••
			***************************************		
Police 11º		Director	111	0-1-8-1	
Sververy,	Mende		Dug	een maa	
1).1 .1 -1 -	27. 4	Vice_President		0 . 17 0	
7.7	Neude Burgharst	Secretary Treasurer	14 /21ge	loy Total	
_					
SEVENTH: by classes, par va	The aggregate alue of shares, sh	number of shares ares without par v	which it has au alue, and series	thority to issue, itemize , if an <b>y</b> , within a class, is	:d 3:
Number of Shares	C	Class	<b>3</b> Serieo	Par Value per Share or Statement that Shares are without	
ber	_	ounon	78	No par Value	2
			ο. •	,	
			∞ •		
			••• 1798	MAR TOTP	>
			7 1 <b>9</b>		
			• •	90.	
				Wir	
			, , , , , , , , , , , , , , , , , , ,		
orm 31 35M 11-77			5.00 5.00BI		
			) 28C		

EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Par Value per Share or Statement that Shares are without Par Value Number of Shares Series no parvalue

Dated February 24, 1978 August W. Meuse Inc (NAME OF CORPORATION)

By Elsie Meuse Gurgharet

Its Pressurer

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

## State of Rhode Island and Providence Plantations

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Monad
110

\ <u>\</u>	ANNUAL R	EPORT	
en de ne	OF		
	August W.	Mende -	Inc
ended, the u	to the provisions of Section 7 ndersigned corporation hereby he name of the corporation is	7.1.1-118 of the submits the follo	General Laws, 1956, as wing annual report:
	It is incorporated under the lav	De .	e Island
THIRD: T	he address of its registered offic	ce in Rhode Islan	d is
			ftreet
	its registered agent in Rhode Is	land at such addi	•
	If a foreign corporation, the ac		
	ne laws of which it is incorporat		
land, briefly s	tated, is Gueral Co	rileating	
.,	(_;	()	
SIXTH: The	names and respective addresses	of its directors a	nd officers are:
	ıme Office		Address
	Director		
	Director	***************************************	
hert \$ 71	Director	111 R 20	12 De Co e
vers 70. ] I		14- / Ligero	N Road - Schuston wis Dr. Johnst
( - )	Vice Presider Luzsharat Secretary	it	. 0 1.0 1
Elice M	Jurghardt Secretary  Jurghardt Treasurer	120 XV/1	euis Or Johnst
SEVENTH:	The aggregate number of shar	es which it has au	
classes, par va	lue of shares, shares without par	value, and series	,
	Class	Series	Par Value per Share or Statement that Shares are without Par Value
Number of Shares	√1800		
	Common		no par value
Shares	Common	2	no par value
Shares	Common	658 <b>9</b> 1-7	no par Nalus

FORM 31 35M 9-76

Eighth: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Par Value per Share
or Statement that
Shares are without
Par Value
We far Nalue Number of Shares Series 165-

Dated 2/19-, 1977 August W. Mende Suc (NAME OF CORPORATION)

By Elie M. Burghardt

Its Fleacurer

### State of Rhode Island and Providence Plantations OFFICE OF THE SECRETARY OF STATE

### ANNUAL REPORT

OF

Pursuant to the pro- amended, the undersigned	visions of Section I corporation hereb	7-1.1-118 of the	General Laws, 1956, as
			T W. MENDE, INC.
SECOND: It is incorp	porated under the l	laws of	Rhode Island
			and is
nd the name of its registe	red agent in Rhode	Island at such ad	dress is.
			incipal office in the state or
and, briefly stated, is	***************************************	Woodworking	ctually engaged in Rhode
		•••••••••••••••••••••••••••••••••••••••	
Name	Office	esses of its directo	rs and officers are:
Name	Office Director	esses of its directo	
Name	Office Director Director	esses of its directo	
Name	Director Director Director		Address
Name	Director Director Director Director Director		Address
Name	Director Director Director Director Director Director		Address
Name	Director Director Director Director Director Director Director		Address
Name	Director Director Director Director Director Director Director Director Director	14 Bigelo	Address  W. ROAD JOHNSTON R.
Name	Director Director Director Director Director Director Director Director Vice President	14 BIGELO	Address  W. ROAD. JOHNSTON R.
Name  BERT H. MENDE  HN V. BURGHARDT  SIE MENDE	Director Secretary	14 BIGELO t 120 Hopk	Address  W. ROAD JOHNSTON R.
Name  DERT H. MENDE  OHN W. BURGHARDT  SIE MENDE  BURGHARDT  SEVENTH: The aggreg	Director Director Director Director Director Director Director Director Director Tresident Vice President Secretary Treasurer	14 BIGELO  t 120 Hope  SA	Address  W. ROAD. JOHNSTON R.  INS. AVENUE JOHNSTON  ME.  Ithority to issue, itemized
Name  DERT H. MENDE  OHN W. BURGHARDT  SIE MENDE  BURGHARDT  SEVENTH: The aggreg	Director Director Director Director Director Director Director Director Director Tresident Vice President Secretary Treasurer	14 BIGELO  t 120 Hope  SA	Address  W. ROAD JOHNSTON R.  INS AVENUE JOHNSTON  ME.  Ithority to issue, itemized  s, if any, within a class, is:  Par Value per Share
Name  OBERT H. MENDE  OHN W. BURGHARDT  SIE MENDE  BURGHARDT  SEVENTH: The aggreg	Director Director Director Director Director Director Director Director Director Tresident Vice President Secretary Treasurer	14 BIGELO  t 120 Hope  SA	Address  W. ROAD JOHNSTON R.  INS. AVENUE JOHNSTON  ME.  Ithority to issue, itemized  s, if any, within a class, is:



EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	Series	Par Value per Share or Statement that Shares are without Par Value	
165	Соммом		NO PAR VALUE	

Dated 2-24-, 19.76

AUGUST W. MENDE, INC.
(NAME OF CORPORATION)

By Elsie Mende Burghard

JU. 17-76 STATE JULY APARA \* 15.00

## State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

#### ANNUAL REPORT

 $\mathbf{OF}$ 

		_			
		ende, Inc.			
Pursuant to the provis amended, the undersigned c	orporation herel	by submits the followin	g annual re	port:	
FIRST: The name of t	the corporation i	s August W. Me	NDE, INC	×.	
SECOND: It is incorpo	rated under the	laws of RHODE	ISLAND		
		office in Rhode Island is PROVIDENC			
and the name of its registere					
and the name of restriction	<b>U</b> .				
		e address of its princip			
country under the laws of w	men it is incorpo	orated is			
			19 7		•
		s in which it is actual		. in Kn	oae
Island, briefly stated, is					******
		I NG			*
	GENERAL (	CONTRACTING		.,	
SIXTH: The names and	l respective addi	resses of its directors an	nd officers an	re:	
Name		A	201633		
	Director				
	Director				
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	Director				
Robert H. Mende		14 WATSON AVEN	ив Јона	N.S.T.O.N.	
		ent			
John W. Burghardt		120 Hopkins		"	<i>tt</i>
Elsie Mende Burgha		11	n	11	
SEVENTH: The aggreg	ata numbar of sh	oros which it has autho	rity to issu	e itemi	zed
by classes, par value of shares	s, shares without	par value, and series, if	any, within	a class,	is:
,,	•		Par Value or Statem	per Share	
Number of Shares	Class	Series	Shares are Par V	e without	
PHOLES	Class	SOLABO			-
600	Common		No PA	AR VA	LUE

Eighth: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	Series	Par Value per Share or Statement that Shares are without Par Value		
165	Common		No par value		

Dated FEBRUARY 25 , 19 75

## State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

#### ANNUAL REPORT

 $\mathbf{OF}$ 

	Qu	guet W	Mende	die		
	t to the provision undersigned cor	ns of Section poration here	o 7-1.1-118 of by submits the	the General following an	l Laws, 1956, as inual report:	
SECOND:	It is incorpora	ted under the	laws of	RHODE I	SLAND	
THIRD:					R.I.	
		No. 10				
	<del>-</del>	=		= =	fice in the state or	
, .		Woodw			ngaged in Rhode	
	The names and re	Office Director Director Director Director Director	resses of its dire	ectors and off		
Гони W. Bu	RGHARDT	President	<i>120 Hopkin</i> ent		JOHNSTON R	. I.
OBERT H. LSIE MEND	Mende e Burghardt	Secretary Treasurer			Johnston R Johnston R.	
					to issue, itemized within a class, is :	
Number o Shares	<b>f</b>	Class	Series		ar Value per Share or Statement that Shares are without Par Value	
600	Coi	MON			NO PAR VALUE	

FEB 28 1974

FORM 31 35M 8-73

EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares

Class
Class
Series
Par Value per Share or Statement that Shares are without Par Value
Par Value

No PAR VALUE

Dated February 25, 1974

Gegust W. Mende Suc-

By Elsie Mende Surglearat

MAY 16-74 STATE 1395 AR\*\*\*\*15.00

#### State of Rhode Island and Providence Plantations OFFICE OF THE SECRETARY OF STATE

### ANNUAL REPORT

of

	August W. M	ENDE, Ivc.	3-14	
amended, the undersigne	d corporation hereby	submits the follo	Seneral Laws, 1956, wing annual report:	
	2 die oor portation is.		5. <b></b>	
SECOND: It is income	rporated under the la	ws of STATE	of Rhode Islan	ס
			d is	
(PUSINESS) (AGENT) and the name of its regist	235 CHALKSTONE 701 OLD COLONY cred agent in Rhode	AVENUE PRO BUILDING Island at such add	ress is	<u>0</u> 2908 
FOURTH: If a forei country under the laws of		_	ipal office in the state	
FIFTH: The charact	er of the business in w	hich it is actually e	ngaged in Rhode Islan	d,
briefly stated, is				
Name	Director Director		Address	····
	Director			
John W. Burghardt			enue Johnston	R.I.
Robert H. Mende			Road Johnston	 r. R. 1 .
Elsie Burghardt			enue Johnston	
SEVENTH: The aggre	gate number of share	s which it has auth	ority to issue, itemize	ď
Number of Shares	Class	Series	Par Value per Share or Statement that Shares are without Par Value	
600	Common		NO PAR VALUE	

FEB 21 1973

In C

EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares Class		Series	Par Value per Share or Statement that Shares are without Par Value
165	Common		NO PAR VALUE

Dated Lebruary 14, 19 73

NAR -2-73 \$15-0F 1638 AR\*\*\* 15.00