



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

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 34904		2. Name of Corporation ROSCITI ASSOCIATES, INC.			
3. Street Address Principal Business Office 123 King Philip Street, P.O. Box 19120		City Johnston	State RI	Zip 02919	
4. Business Phone No. 401-453-2336		5. State of Incorporation RHODE ISLAND		6. SIC Code 5553	
7. Brief Description of the Character of Business Conducted in Rhode Island DEALING IN REAL PROPERTY					
8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Henry V. Rosciti			Vice President Name Anthony F. Rosciti		
Street Address 123 King Philip Street, P.O. Box 19120			Street Address 123 King Philip Street, P.O. Box 19120		
City Johnston	State RI	Zip 02919	City Johnston	State RI	Zip 02919
Secretary Name Anthony F. Rosciti			Treasurer Name Henry V. Rosciti		
Street Address 123 King Philip Street, P.O. Box 19120			Street Address 123 King Philip Street, P.O. Box 19120		
City Johnston	State RI	Zip 02919	City Johnston	State RI	Zip 02919
9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Henry V. Rosciti			Director Name Anthony F. Rosciti		
Street Address 123 King Philip Street, P.O. Box 19120			Street Address 123 King Philip Street, P.O. Box 19120		
City Johnston	State RI	Zip 02919	City Johnston	State RI	Zip 02919
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
600 COMM NO PAR VALUE			200	Common	No Par Value

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



3 4 9 0 4

34904 DBC 01/25/05 02:34:16 PM

File Date 12-4-05

Check No. 2152

By [Signature]

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] Date 1/26/05

Henry V. Rosciti

President

Form 630 12/01



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

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 34904 2. Name of Corporation ROSCITI ASSOCIATES, INC.

3. Street Address Principal Business Office
139 KING PHILIP STREET

City State Zip
JOHNSTON RI 02919

4. Business Phone No.
401 453-2336

5. State of Incorporation
RHODE ISLAND

6. SIC Code
5553

7. Brief Description of the Character of Business Conducted in Rhode Island
DEALING IN REAL PROPERTY

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

President Name
Henry V. Rosciti

Street Address
P. O. Box 19120

City State Zip
Johnston RI 02919

Secretary Name
Anthony F. Rosciti

Street Address
P. O. Box 19120

City State Zip
Johnston RI 02919

Vice President Name
Anthony F. Rosciti

Street Address
P. O. Box 19120

City State Zip
Johnston RI 02919

Treasurer Name
Henry V. Rosciti

Street Address
P. O. Box 19120

City State Zip
Johnston RI 02919

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

Director Name
Henry V. Rosciti

Street Address
P. O. Box 19120

City State Zip
Johnston RI 02919

Director Name
Henry V. Rosciti

Street Address
P. O. Box 19120

City State Zip
Johnston RI 02919

Director Name
Anthony F. Rosciti

Street Address
P. O. Box 19120

City State Zip
Johnston RI 02919

Director Name
Anthony F. Rosciti

Street Address
P. O. Box 19120

City State Zip
Johnston RI 02919

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

AUTHORIZED SHARES

Number of Shares Class/Series Par Value

600 COMM NO PAR VALUE

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

ISSUED SHARES

Number of Shares Class/Series Par Value

200 Common No Par Value

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



3 4 9 0 4

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.

Henry V. Rosciti 8/19/04
Signature of Officer Date

Henry V. Rosciti
Print or Type Name of Officer

President
Title of Officer

34904 DBC 08/17/04 08:51:39 AM

File Date 8/19/04

Check No. AUG 21 2004

By: [Signature]

FOR SECRETARY OF STATE USE ONLY

Form 630 12/01



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

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 2003
Filing Period: January 1-March 1 • Filing Fee: \$50.00



(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 34904		2. Name of Corporation ROSCITI ASSOCIATES, INC.			
3. Street Address Principal Business Office 139 King Philip Street		City Johnston	State RI	Zip 02919	
4. Business Phone No. (401) 351-6681		5. State of Incorporation RHODE ISLAND		6. SIC Code 5553	
7. Brief Description of the Character of Business Conducted in Rhode Island dealing in real property					
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Henry V. Rosciti		Vice President Name Anthony F. Rosciti			
Street Address P. O. Box 19120		Street Address P. O. Box 19120			
City Johnston	State RI	Zip 02919	City Johnston	State RI	Zip 02919
Secretary Name Anthony F. Rosciti		Treasurer Name Henry V. Rosciti			
Street Address P. O. Box 19120		Street Address P. O. Box 19120			
City Johnston	State RI	Zip 02919	City Johnston	State RI	Zip 02919
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Henry V. Rosciti		Director Name Anthony F. Rosciti			
Street Address P. O. Box 19120		Street Address P. O. Box 19120			
City Johnston	State RI	Zip 02919	City Johnston	State RI	Zip 02919
Director Name		Director Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
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			200	Common	No Par Value

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



* 3 4 9 0 4 *

File Date: 1-21-03
Check No.: 879
By: UP

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: Henry V. Rosciti Date: Jan. 20, 2003
Print or Type Name of Officer: Henry V. Rosciti
Title of Officer: President

Form 630 12/02



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

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 2003
Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 87726 2. Name of Corporation Rosati & Associates, Inc.

3. Street Address Principal Business Office
P.O. Box 6423

4. Business Phone No.

453-1400

5. State of Incorporation

RHODE ISLAND

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

Public Affairs / Government Affairs

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

President Name
Rick J. Rosati

Street Address
P.O. Box 6423

City Providence State RI Zip 02940

Secretary Name
Elizabeth A. Cameron

Street Address
P.O. Box 6423

City Providence State RI Zip 02940

City Providence State RI

Zip 02940

6. SIC Code
7260

Vice President Name
Elizabeth A. Cameron

Street Address
P.O. Box 6423

City Providence State RI Zip 02940

Treasurer Name
Rick J. Rosati

Street Address
P.O. Box 6423

City Providence State RI Zip 02940

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

Director Name

Street Address

City State Zip

Director Name

Street Address

City State Zip

Director Name

Street Address

City State Zip

Director Name

Street Address

City State Zip

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

AUTHORIZED SHARES

Number of Shares Class/Series Par Value

1,000 NO PAR VALUE

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

ISSUED SHARES

Number of Shares Class/Series Par Value

100

0

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



* 8 7 7 2 6 *

File Date: FILED

Check No.: JAN 09 2003

By: BY CH#5785

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 Elizabeth A. Cameron Date 1/9/03

Print or Type Name of Officer Elizabeth A. Cameron

Title of Officer Vice President



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

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 34304 2. Name of Corporation ROSCITI ASSOCIATES, INC.
3. Street Address Principal Business Office 139 King Philip Street City Johnston State RI Zip 02919
4. Business Phone No. (401) 351-6681 5. State of Incorporation RHODE ISLAND 6. SIC Code 5553

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

dealing in real property

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) • FILL IN SPACES BEFORE USING ATTACHMENTS

President Name <u>Henry V. Rosciti</u> Street Address <u>P. O. Box 19120</u> City <u>Johnston</u> State <u>RI</u> Zip <u>02919</u> Secretary Name <u>Anthony F. Rosciti</u> Street Address <u>P. O. Box 19120</u> City <u>Johnston</u> State <u>RI</u> Zip <u>02919</u>	Vice President Name <u>Anthony F. Rosciti</u> Street Address <u>P. O. Box 19120</u> City <u>Johnston</u> State <u>RI</u> Zip <u>02919</u> Treasurer Name <u>Henry V. Rosciti</u> Street Address <u>P. O. Box 19120</u> City <u>Johnston</u> State <u>RI</u> Zip <u>02919</u>
--	---

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

Director Name <u>Henry V. Rosciti</u> Street Address <u>P. O. Box 19120</u> City <u>Johnston</u> State <u>RI</u> Zip <u>02919</u> Director Name <u>Anthony F. Rosciti</u> Street Address <u>P. O. Box 19120</u> City <u>Johnston</u> State <u>RI</u> Zip <u>02919</u>	Director Name <u>Anthony F. Rosciti</u> Street Address <u>P. O. Box 19120</u> City <u>Johnston</u> State <u>RI</u> Zip <u>02919</u> Director Name <u>Henry V. Rosciti</u> Street Address <u>P. O. Box 19120</u> City <u>Johnston</u> State <u>RI</u> Zip <u>02919</u>
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10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES	Class/Series	Par Value
600 COMM NO PAR VALUE		

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

ISSUED SHARES	Class/Series	Par Value
200	Common	No Par Value

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



* 3 4 9 0 4 *

File Date: 12-31-01

Check No.: 672

By: [Signature]

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] Dec. 28, 2001
Signature of Officer Date

Henry V. Rosciti

Print or Type Name of Officer

President

Title of Officer

5



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

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



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **34904** 2. Name of Corporation **ROSCITI ASSOCIATES, INC.**

3. Street Address Principal Business Office
139 King Philip Street

City **Johnston** State **RI** Zip **02919**

4. Business Phone No.
(401) 351-6681

5. State of Incorporation
RHODE ISLAND

6. SIC Code
5553

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

8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) **FILL IN SPACES BEFORE USING ATTACHMENTS**
President **Henry V. Rosciti** Vice President **Anthony F. Rosciti**

Street Address **Box 19120**

Street Address **Box 19120**

City **Johnston** State **RI** Zip **02919**

City **Johnston** State **RI** Zip **02919**

Secretary **Anthony F. Rosciti**

Treasurer **Henry V. Rosciti**

Street Address **Box 19120**

Street Address **Box 19120**

City **Johnston** State **RI** Zip **02919**

City **Johnston** State **RI** Zip **02919**

9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) **FILL IN SPACES BEFORE USING ATTACHMENTS**
Director **Henry V. Rosciti** Director **Anthony F. Rosciti**

Street Address **Box 19120**

Street Address **Box 19120**

City **Johnston** State **RI** Zip **02919**

City **Johnston** State **RI** Zip **02919**

Director Name

Director Name

Street Address

Street Address

City State Zip

City State Zip

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

AUTHORIZED SHARES

Number of Shares Class/Series Par Value

600 COMM NO PAR VALUE

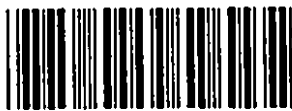
11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)

ISSUED SHARES

Number of Shares Class/Series Par Value

200 Common No Par Value

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



* 3 4 9 0 4 *

File Date: **FILED**

Check No.: **MAR 22 2001**

By: **00518**

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.

Henry V. Rosciti 3/15/01
Signature Date

Print of President/Officer

Title of Officer



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

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



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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **34904** 2. Name of Corporation **ROSCITI ASSOCIATES, INC.**

3. Street Address Principal Business Office
139 King Philip Street City **Johnston** State **RI** Zip **02919**
4. Business Phone No. **(401) 351-6681** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **5553**

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

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

President Name Henry V. Rosciti	Vice President Name Anthony F. Rosciti
Street Address P.O. Box 19120	Street Address P.O. 19120
City Johnston State RI Zip 02919	City Johnston State RI Zip 02919
Secretary Name Anthony F. Rosciti	Treasurer Name Henry V. Rosciti
Street Address P.O. Box 19120	Street Address P.O. Box 19120
City Johnston State RI Zip 02919	City Johnston State RI Zip 02919

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

Director Name Henry V. Rosciti	Director Name Anthony F. Rosciti
Street Address P.O. Box 19120	Street Address P.O. Box 19120
City Johnston State RI Zip 02919	City Johnston State RI Zip 02919
Director Name	Director Name
Street Address	Street Address
City	City
State	State
Zip	Zip

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

AUTHORIZED SHARES
Number of Shares Class/Series Par Value
600 SHS NO PAR VAL COM

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

ISSUED SHARES
Number of Shares Class/Series Par Value
200 Common No Par Value

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



* 3 4 9 0 4 *

FILED

File Date: **MAR 03 2000**

Check No.: **0015058**

By: **Henry V. Rosciti**

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 **Henry V. Rosciti** Date **2/17/00**

Print or Type Name of Officer **Henry V. Rosciti**

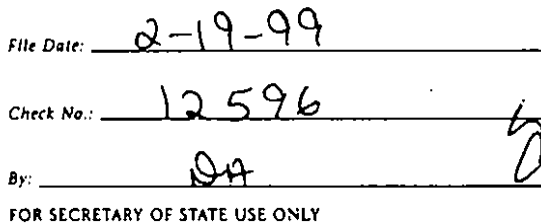
Title of Officer **President**



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

(FORM MUST BE TYPED IN BLACK)

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



Signature of Officer Henry V. Rosciti Date 2/9/99
Print or Type Name of Officer Henry V. Rosciti
Title of Officer President



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

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



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1998

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 34904		2. Name of Corporation ROSCITI ASSOCIATES, INC.	
3. Street Address Principal Business Office 139 King Philip Street		City Johnston	State RI
4. Business Phone No. (401) 351-6681		Zip 02919	6. SIC Code
5. State of Incorporation			
7. Brief Description of the Character of Business Conducted in Rhode Island Dealing in real property.			

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT)

President Name Henry V. Rosciti			Vice President Name Anthony F. Rosciti		
Street Address P.O. Box 19120			Street Address P.O. Box 19120		
City Johnston	State RI	Zip 02919	City Johnston	State RI	Zip 02919
Secretary Name Anthony F. Rosciti			Treasurer Name Henry V. Rosciti		
Street Address P.O. Box 19120			Street Address P.O. Box 19120		
City Johnston	State RI	Zip 02919	City Johnston	State RI	Zip 02919

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

Director Name Henry V. Rosciti			Director Name Anthony F. Rosciti		
Street Address P.O. Box 19120			Street Address P.O. Box 19120		
City Johnston	State RI	Zip 02919	City Johnston	State RI	Zip 02919
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip

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

AUTHORIZED SHARES		
Number of Shares	Class/Series	Par Value
600	Common	No Par Value

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

ISSUED SHARES		
Number of Shares	Class/Series	Par Value
200	Common	No Par Value

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

File Date: **3-5-98**
981
Check No.:
By: **1UP**
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.

Henry V. Rosciti 3/2/98
Signature of Officer Date
Henry V. Rosciti
Print or Type Name of Officer
President
Title of Officer



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

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



PROFIT CORPORATION ANNUAL REPORT 1997

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.

34904

2. Name of Corporation

ROSCITI ASSOCIATES, INC.

3. Street Address Principal Business Office

139 King Philip Street

City

Johnston

State

RI

Zip

02919

4. Business Phone No.

(401) 453-4000

5. State of Incorporation

RI

6. SIC Code

5553

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

Dealing in real property

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT)

President Name

Henry V. Rosciti

Street Address

P.O. Box 19120

City

Johnston

State

RI

Zip

02919

Vice President Name

Anthony F. Rosciti

Street Address

P.O. Box 19120

City

Johnston

State

RI

Zip

02919

Secretary Name

Anthony F. Rosciti

Street Address

P.O. Box 19120

City

Johnston

State

RI

Zip

02919

Treasurer Name

Henry V. Rosciti

Street Address

P.O. Box 19120

City

Johnston

State

RI

Zip

02919

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

Director Name

Henry V. Rosciti

Street Address

P.O. Box 19120

City

Johnston

State

RI

Zip

02919

Director Name

Anthony F. Rosciti

Street Address

P.O. Box 19120

City

Johnston

State

RI

Zip

02919

Street Address

City

State

Zip

Street Address

City

State

Zip

10. SHARES AUTHORIZED AND ISSUED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

600

Common

No Par Value

ISSUED SHARES

Number of Shares

Class/Series

Par Value

200

Common

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 herein are true and correct.

Signature of Officer

6/14/97

Date

Henry V. Rosciti
Print or Type Name of Officer

President
Title of Officer

File Date: 7/24/97

Check No: 6668

By: 4059

FOR SECRETARY OF STATE USE ONLY

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. 34904		2. NAME OF CORPORATION ROSCITI ASSOCIATES, INC.	
3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE 139 King Philip Street		CITY Johnston	STATE RI
4. BUSINESS PHONE NO. (401) 453-4000		5. STATE OF INCORPORATION RHODE ISLAND	6. SIC CODE 5553
7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND Dealing in real property			

8. NAMES AND ADDRESSES OF THE OFFICERS					
PRESIDENT NAME Rose Rosciti			VICE PRESIDENT NAME		
STREET ADDRESS 139 King Philip Street			STREET ADDRESS		
CITY Johnston	STATE RI	ZIP CODE	CITY	STATE	ZIP CODE
SECRETARY NAME Rose Rosciti			TREASURER NAME		
STREET ADDRESS 139 King Philip Street			STREET ADDRESS		
CITY Johnston	STATE RI	ZIP CODE	CITY	STATE	ZIP CODE

9. NAMES AND ADDRESSES OF THE DIRECTORS					
DIRECTOR NAME Rose Rosciti			DIRECTOR NAME		
STREET ADDRESS 139 King Philip Street			STREET ADDRESS		
CITY Johnston	STATE RI	ZIP CODE	CITY	STATE	ZIP CODE
DIRECTOR NAME			DIRECTOR NAME		
STREET ADDRESS			STREET ADDRESS		
CITY	STATE	ZIP CODE	CITY	STATE	ZIP CODE

10. SHARES AUTHORIZED AND ISSUED					
AUTHORIZED SHARES			ISSUED SHARES		
NUMBER OF SHARES	CLASS / SERIES	PAR VALUE	NUMBER OF SHARES	CLASS / SERIES	PAR VALUE
600 SHS NO PAR VAL COM			200	Common n/a	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 herein are true and correct.

Rose Rosciti
Signature of Officer
Rose Rosciti
Print or Type Name of Officer
President
Title of Officer
6-4-96
Date

File Date: 6-10-96
Check No: 4001
By: NR
For Secretary of State Use Only

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

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: 0034904 Annual Report for the Year: 1995

Name of Corporation: ROSCITI ASSOCIATES, INC.

Business entity organized under the
laws of the State of: Rhode Island
1.1)

Business Entity is (check one):
☒ Business Corporation (See RIGL Chapter 7-

For foreign entity, address and
telephone number of principal office:

☐ Professional Service Corporation (See RIGL
Chapter 7-5.1)

Phone: ()

Brief statement of the character of business
conducted in Rhode Island:
Dealing in real property

Address and telephone of the principal
office of business entity in Rhode Island
(Provide street address - Not P.O. Box):
139 King Philip Street
Johnston, RI 02919

Phone: (401) 421-8030

THE NAMES OF THE OFFICERS ARE:

	Street Address	City/State	Zip Code
PRESIDENT	<u>Rose Rosciti, 139 King Philip Street, Johnston, Rhode Island</u>		
VICE PRESIDENT			
SECRETARY			
TREASURER	<u>Rose Rosciti, 139 King Philip Street, Johnston, Rhode Island</u>		

THE NAMES OF THE DIRECTORS ARE:

NAME	Street Address	City/State	Zip Code

NUMBER OF SHARES AUTHORIZED (Rider may be attached)		NUMBER OF SHARES ISSUED AND OUTSTANDING (Rider may be attached)	
Number of Shares	Class/Series	Number of Shares	Class/Series
600	common	200	common

Date March 21, 19 95

By: Rose Rosciti

Rose Rosciti
Print or Type Name of Officer Signing

President
Title of Officer Signing

DESIGNATED REGISTERED OR RESIDENT AGENT FOR SERVICE OF PROCESS:

PLEASE NOTE: If the registered office and/or registered agent indicated below is incorrect, Form 9 must be filed.

Richard A. Licht
One Park Row
Providence, RI 02903

FILED

APR 6 1995

By: [Signature]
1257

Filing Fee \$50.00
Payable to:
Secretary of State

PLEASE TYPE OR PRINT
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

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

Corporate ID: 0034904 Annual Report for the Year: 1994

Name of Business Entity: ROSCITI ASSOCIATES, INC.

Business entity organized under the laws of the State of: Rhode Island (1.1)

Federal Taxpayer Identification Number:

For foreign entity, address and telephone number of principal office:

Phone:

Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):
139 King Philip Street
Johnston, RI 02919

Phone: 401-351-6681

Business Entity is (check one):
☒ Business Corporation (See RIGL Chapter 7-

☐ Professional Service Corporation (See RIGL Chapter 7-5.1)

☐ Limited Liability Company (See RIGL 7-16)

Name, title and mailing address of contact person to whom communications may be directed:

Joseph DeAngelis
One Park Row
Providence, RI 02903

Brief statement of the character of business conducted in Rhode Island:
Dealing in real property

Date of Organization: June 21, 1985

Date of Qualification to do business in Rhode Island (if foreign entity):

THE NAMES OF THE OFFICERS ARE:

☐ Chief Executive Officer or ☒ President (Check One) Street Address City/State Zip Code

Rose Rosciti, 139 King Philip Street, Johnston, Rhode Island

☐ Chief Operating Officer or ☒ V. President (Check One) Street Address City/State Zip Code

Henry Rosciti, 139 King Philip Street, Johnston, Rhode Island

☐ Custodian of Records or ☒ Secretary (Check One) Street Address City/State Zip Code

Rose Rosciti, 139 King Philip Street, Johnston, Rhode Island

☐ Chief Financial Officer or ☒ Treasurer (Check One) Street Address City/State Zip Code

Henry Rosciti, 139 King Philip Street, Johnston, Rhode Island

THE NAMES OF THE DIRECTORS ARE:

Name Street Address City/State Zip Code

Henry Rosciti, 139 King Philip Street, Johnston, Rhode Island

Name Street Address City/State Zip Code

Rose Rosciti, 139 King Philip Street, Johnston, Rhode Island

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 (If Applicable) NUMBER OF SHARES ISSUED AND OUTSTANDING

NUMBER 600 NUMBER 200

CLASS common CLASS common

SERIES n/a SERIES n/a

PAR VALUE OR WITHOUT PAR No par value PAR VALUE OR WITHOUT PAR No par value

Date 2/17/94 By: Rose Rosciti

FILED
FEB 24 1994
By: g. Check # 6935
Rose Rosciti

Print or Type Name of Officer Signing

President

Title of Officer Signing

DESIGNATED REGISTERED OR RESIDENT AGENT FOR SERVICE OF PROCESS:

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.

Filing Fee: \$50.00

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 34904

Annual Report for the year 1993

FIRST: The name of the corporation is Rosciti Associates, Inc.

SECOND: It is incorporated under the laws of Rhode Island.

THIRD: Character of business, briefly stated, is dealing in real property.

FOURTH: If foreign corporation, address of its principal office:

FIFTH: Business address in Rhode Island: 139 King Philip Street, Johnston, RI 02909.

SIXTH: Names and address of its directors and officers:

<u>Name</u>	<u>Office</u>	<u>Address</u>
Henry Rosciti	Director	139 King Philip St. Johnson, RI
Rose Rosciti	Director	Same as above
Henry V. Rosciti	President	Same as above
Anthony F. Rosciti	Vice President	Same as above
Anthony F. Rosciti	Secretary	Same as above
Henry V. Rosciti	Treasurer	Same as above

SEVENTH: Number of Shares authorized:

<u>No of Shares</u>	<u>Class</u>	<u>Series</u>	<u>Par Value or statement that shares are without par value</u>
600	common	n/a	No par value

EIGHTH: Number of Shares issued:

<u>No of Shares</u>	<u>Class</u>	<u>Series</u>	<u>Par Value or statement that shares are without par value</u>
200	common	n/a	No par value

Dated: December 1, 1993

ROSCITI ASSOCIATES, INC.
(Name of Corporation)

By: Henry V. Rosciti
Henry V. Rosciti, President

(Report must be signed by an officer)

Title: President

Rec'd & Filed DEC 3 1993

AMT #29
166608

Filing Fee \$50.00

CE 2964
Dec 72696 Jm 43

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

34904

1992

Corporate ID.....

Annual Report for the year.....

FIRST: The name of the corporation is.....
ROSCITI ASSOCIATES, INC.

SECOND: It is incorporated under the laws of.....
Rhode Island

THIRD: Character of business, briefly stated, is.....
dealing in real property

FOURTH: If foreign corporation, address of its principal office.....

FIFTH: Business address in Rhode Island.....

139 King Philip Street, Johnston, RI 02909

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
Henry V. Rosciti	Director	139 King Philip St., Johnston, RI
Anthony F. Rosciti	Director	139 King Philip St., Johnston, RI
	Director	
Henry V. Rosciti	President	139 King Philip St., Johnston, RI
Anthony F. Rosciti	Vice President	139 King Philip St., Johnston, RI
Anthony F. Rosciti	Secretary	139 King Philip St., Johnston, RI
Henry V. Rosciti	Treasurer	139 King Philip St., Johnston, RI

SEVENTH: Number of Shares authorized:

No. of Shares
600

Class
Common

PAID

JAN 24 1992

SECY OF STATE

Par Value
or statement that
shares are without
par value
No Par Value

EIGHTH: Number of Shares issued:

No. of Shares
200

Class
Common

Series

Par Value
or statement that
shares are without
par value
No Par Value

Dated January 13, 1992

ROSCITI ASSOCIATES, INC.
(Name of Corporation)

By Henry V. Rosciti

Henry V. Rosciti, President

Title

(Report must be signed by an officer)

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

34904

1991

Corporate ID.....

Annual Report for the year.....

FIRST: The name of the corporation is.....
ROSCITI ASSOCIATES, INC.**Rhode Island**

SECOND: It is incorporated under the laws of.....

THIRD: Character of business, briefly stated, is.....
dealing in real property

FOURTH: If foreign corporation, address of its principal office.....

FIFTH: Business address in Rhode Island.....
5 Benefit Street, Providence, Rhode Island 02904

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
Henry V. Rosciti	Director	139 King Philip St., Johnston, RI
Anthony F. Rosciti	Director	139 King Philip St., Johnston, RI
	Director	
Henry V. Rosciti	President	139 King Philip St., Johnston, RI
Anthony F. Rosciti	Vice President	139 King Philip St., Johnston, RI
Anthony F. Rosciti	Secretary	139 King Philip St., Johnston, RI
Henry V. Rosciti	Treasurer	139 King Philip St., Johnston, RI

SEVENTH: Number of Shares authorized:

No. of Shares
600Class
CommonPAID
Series

JAN 14 1991

SECY OF STATE

Par Value
or statement that
shares are without
par value

No Par Value

EIGHTH: Number of Shares issued:

No. of Shares
200Class
Common

Series

Par Value
or statement that
shares are without
par value

No Par Value

Dated January 14, 1991

ROSCITI ASSOCIATES, INC.

(Name of Corporation)

By 

Title Henry V. Rosciti, President

(Report must be signed by an officer)

Filing Fee \$15.00

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

34904

1990

Corporate ID..... Annual Report for the year.....

FIRST: The name of the corporation is.....
ROSCITI ASSOCIATES, INC.

Rhode Island

SECOND: It is incorporated under the laws of.....

THIRD: Character of business, briefly stated, is.....
dealing in real property

FOURTH: If foreign corporation, address of its principal office.....

FIFTH: Business address in Rhode Island.....
139 King Philip Street, Johnston, RI 02909

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
Henry V. Rosciti	Director	139 King Philip St., Johnston, RI
Anthony F. Rosciti	Director	139 King Philip St., Johnston, RI
	Director	
Henry V. Rosciti	President	139 King Philip St., Johnston, RI
Anthony F. Rosciti	Vice President	139 King Philip St., Johnston, RI
Anthony F. Rosciti	Secretary	139 King Philip St., Johnston, RI
Henry V. Rosciti	Treasurer	139 King Philip St., Johnston, RI

SEVENTH: Number of Shares authorized:

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:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
200	Common		No Par Value

PAID


MAR 01 1990

SECY. OF STATE

Dated January 8, 1990

ROSCITI ASSOCIATES, INC.

(Name of Corporation)

By 
Henry V. Rosciti, President
Title.....

(Report must be signed by an officer)

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903

D.P.

Corporate ID 34904

Annual Report for the year 1989

FIRST: The name of the corporation is

ROSCITI ASSOCIATES, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is owning, renting, leasing, developing, holding, financing, mortgaging, selling, improving, exchanging and otherwise dealing in and disposing of real property in general and for any other lawful purpose.

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island

139 King Philip Street, Johnston, RI 02919

SIXTH: Names and addresses of its directors and officers:

(Attach rider if necessary)

Name

Office

Address (including number, street, zip code)

Henry V. Rosciti

Director

139 King Philip St., Johnston, RI

Anthony F. Rosciti

Director

139 King Philip St., Johnston, RI

Director

Henry V. Rosciti

President

139 King Philip St., Johnston, RI

Anthony F. Rosciti

Vice President

139 King Philip St., Johnston, RI

Anthony F. Rosciti

Secretary

139 King Philip St., Johnston, RI

Henry V. Rosciti

Treasurer

139 King Philip St., Johnston, RI

SEVENTH: Number of Shares authorized:

No. of Shares

Class

600

Common

PAID

JAN 27 1989

SEC'Y OF STATE

Par Value
or statement that
shares are without
par value

No Par Value

EIGHTH: Number of Shares issued:

No. of Shares

Class

Series

200

Common

Par Value
or statement that
shares are without
par value

No Par Value

Dated January 10, 19 89

ROSCITI ASSOCIATES, INC.

(Name of Corporation)

By

Henry V. Rosciti, President

Title

(Report must be signed by an officer)

RECEIVED
SECRETARY OF STATE
CORPORATIONS DIV.
JAN 27 1989

State of Rhode Island and Providence PlantationsCORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903Corporate ID 34904 Annual Report for the year 1988

FIRST: The name of the corporation is

ROSCITI ASSOCIATES, INC.SECOND: It is incorporated under the laws of Rhode IslandTHIRD: Character of business, briefly stated, is owning, renting, leasing, developing,
holding, financing, mortgaging, selling, improving, exchanging and otherwise
dealing in and disposing of real property in general and for any other lawful
purpose

FOURTH: If foreign corporation, address of its principal office.....

FIFTH: Business address in Rhode Island

139 King Philip Street, Johnston, RI 02919

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
<u>Henry V. Rosciti</u>	<u>Director</u>	<u>139 King Philip St., Johnston, RI</u>
<u>Anthony F. Rosciti</u>	<u>Director</u>	<u>139 King Philip St., Johnston, RI</u>
	<u>Director</u>	
<u>Henry V. Rosciti</u>	<u>President</u>	<u>139 King Philip St., Johnston, RI</u>
<u>Anthony F. Rosciti</u>	<u>Vice President</u>	<u>139 King Philip St., Johnston, RI</u>
<u>Anthony F. Rosciti</u>	<u>Secretary</u>	<u>139 King Philip St., Johnston, RI</u>
<u>Henry V. Rosciti</u>	<u>Treasurer</u>	<u>139 King Philip St., Johnston, RI</u>

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
<u>600</u>	<u>Common</u>		<u>No Par Value</u>

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
<u>200</u>	<u>Common</u>		<u>No Par Value</u>

Dated January 4, 19 88ROSCITI ASSOCIATES, INC.
(Name of Corporation)By Henry V. Rosciti, PresidentTitle Pres

(Report must be signed by an officer)

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903Corporate ID 34904 Annual Report for the year 1987

FIRST: The name of the corporation is

ROSCITI ASSOCIATES, INC.

SECOND: It is incorporated under the laws of Rhode IslandTHIRD: Character of business, briefly stated, is owning, renting, leasing, developing, holding, financing, mortgaging, selling, improving, exchanging and otherwise dealing in and disposing of real property in general and for any other lawful purpose.

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 139 King Philip Street, Johnston, RI 02919

SIXTH: Names and addresses of its directors and officers:

(Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
Henry V. Rosciti	Director	139 King Philip Drive, Johnston, RI
Anthony F. Rosciti	Director	139 King Philip Drive, Johnston, RI
	Director	
Henry V. Rosciti	President	139 King Philip Drive, Johnston, RI
Anthony F. Rosciti	Vice President	139 King Philip Drive, Johnston, RI
Anthony F. Rosciti	Secretary	139 King Philip Drive, Johnston, RI
Henry V. Rosciti	Treasurer	139 King Philip Drive, Johnston, RI

SEVENTH: Number of Shares authorized:

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:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
200	Common		No Par Value

Dated January 5, 19 87 **PAID** ROSCITI ASSOCIATES, INC.

(Name of Corporation)

FEB 02 1987

By Henry V. RoscitiSECY OF STATE Henry V. Rosciti, President

(Report must be signed by an officer)

Title

Filing Fee \$15.00

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 34904 Annual Report for the year 1986

FIRST: The name of the corporation is ROSCITI ASSOCIATES, INC.

SECOND: It is incorporated under the laws of Rhode Island
owning, renting, leasing, developing, hold-

THIRD: Character of business, briefly stated, is ing, financing, mortgaging, selling, im-
proving, exchanging and otherwise dealing in and disposing of real property
in general and for any other lawful purpose.

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island

139 King Philip Street, Johnston, RI 02919

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
<u>Henry V. Rosciti</u>	<u>Director</u>	<u>139 King Philip Drive, Johnston, RI</u>
<u>Anthony F. Rosciti</u>	<u>Director</u>	<u>139 King Philip Drive, Johnston, RI</u>
	<u>Director</u>	
<u>Henry V. Rosciti</u>	<u>President</u>	<u>139 King Philip Drive, Johnston, RI</u>
<u>Anthony F. Rosciti</u>	<u>Vice President</u>	<u>139 King Philip Drive, Johnston, RI</u>
<u>Anthony F. Rosciti</u>	<u>Secretary</u>	<u>139 King Philip Drive, Johnston, RI</u>
<u>Henry V. Rosciti</u>	<u>Treasurer</u>	<u>139 King Philip Drive, Johnston, RI</u>

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
<u>600</u>	<u>Common</u>		<u>No Par Value</u>

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
<u>200</u>	<u>Common</u>		<u>No Par Value</u>

Dated January 14, 19 86
ROSCITI ASSOCIATES, INC.
(Name of Corporation)

FEB 19 1986
(Report must be signed by an officer)

By Henry V. Rosciti
Title President