

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 . 1. Corporate ID No.	BLACK)  2. Name of Cor	poration			
4605	THE BUBI	BLE ROOM CAR WAS	SH, INC.		
3. Street Address Principal Busi	iness Office	<del>,, ,,,,,</del> ,,,,	City	State	Zip
335 TAUNTON AVENU	υE		EAST PROVIDENCE	E RI	02914
4. Business Phone No.	<del> </del>	5. State of Incorpora	tion	<del></del>	6. SIC Code
4014312100		RHODE ISLAI	ND		8896
7. Brief Description of the Chai CAR WASH	racter of Business (	Conducted in Rhode Island			
	SES OF THE O	FFICERS ("X" BOX FOR	ATTACHMENT)   FILL IN SI	PACES BEFORE USING AT	TACHMENTS
President Name LEWIS J. SURIANI			Vice President Name ROSEMARY SURIA	NIT	
Street Address	· · · · · · · · · · · · · · · · · · ·		Street Address		
3 LEE ANN DRIVE			.3 LEE ANN DRIV	E	
City	State	Zip	City	State	Zip
BARRINGTON	RI	02806	BARRINGTON	RI	02806
ecretary Name	• • • • • • •		Treasurer Name		
ROSEMARY SURIANI			LEWIS J. SURIA	NI	
Street Address		<del> </del>	* Street Address	<del></del>	
3 LEE ANN DRIVE			3 LEE ANN DRIV	<b>E</b>	
City	State	Zip	City	State	Zip
BARRINGTON	RI	02806	BARRINGTON	RI	02806
9. NAMES AND ADDRES	SSES OF THE D	IRECTORS ("X" BOX FO	RATTACHMENT)   FILL IN	SPACES BEFORE USING	ATTACHMENTS
LEWIS J. SURIANI		ROSEMARY SURIANI			
Sireet Address		· Sirees Address			
3 LEE ANN DRIVE			3 LEE ANN DRIVE		
City	State	Zip	•City	State	Zip
BARRINGTON	RI	02806	BARRINGTON	RI	02806
Director Name			Director Name	!	• • • • • • • • • • •
Street Address			· Street Address	<del></del>	
	10:		·	· <u>, , , </u>	
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZ	J 	OR ATTACHMENT)	11. SHARES ISSUED ("	X" BOX FOR ATTACHMEN	77 🗆
AUTHORIZED SHARES		· · · · - · - · · · · · · · · · · · · ·	ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
600 NO PAR VALUE			600	COMMON	NO PAR
	<i></i>				
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inis report must be sign	ea in ink by ei	iner ine rresident, Vice	President, Segretary, Ass	islam Secretary, Treas	urer, Receiver or Iru
				rjury, declare and affirm	that I have exemined
7 3 0	•			g any accompanying sche	
*4605 DBC 01/08/04 (	01:05:08 PM*		and that all stateme	nts coplained herein are tri	ic and correct.
1171	<b>C</b>		1 X 2	1 Vhr	بالنيد: 🖊
File Date d &	<del>-</del> }	<del></del>	1 Ave	1 1 7 7	11141
Check No. 4413			Signifiure of Officer		thate I I
CHECK TO. 7 (15)		<del>-</del>	Lewis		
B <u>y:</u> (),			Print or Type Name o		
FOR SECRETARY OF STATE	E USE ONLY		Title of Officer	1 Kres	Fr. (20
		1	rine of Officer	1	Form 630



2. Name of Corporation

(FORM MUST BE TYPED IN BLACK)

3. Street Address Principal Business Office

1. Corporate ID No.

4605

Matthew A. Brown, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401,222,3040

Zip

State

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004 Filing Period: January 1 - March 1 Filing Fee: \$50.00

THE BUBBLE ROOM CAR WASH, INC.

335 TAUNTON AVENU	Æ		EAST PROVIDENCE	RI	02914		
4. Business Phone No.		5. State of Incorpora			6. SIC Code		
4014312100		RHODE ISLA	ND:		8896		
7. Brief Description of the Char CAR WASH	acter of Business Con	ducted in Rhode Island					
8. NAMES AND ADDRES	SES OF THE OF	TICERS ("X" BOX FOR	ATTACHMENT)   FILL IN SPACE	S BEFORE USING AT	TACHMENTS		
President Name			Vice President Name	• • • • • • • • • • • • • • • • • • • •			
LEWIS J. SURIANI	···		ROSEMARY SURIANI				
Sireei Address			Street Address 3 LEE ANN DRIVE				
3 LEE ANN DRIVE		17:-	City	State	Zip		
Ciry BARRINGTON	State RI	<i>Zip</i> 02806	BARRINGTON	RI	02806		
ecretary Name	. 177		Treasurer Name				
ROSEMARY SURIANI			LEWIS J. SURIANI				
ireei Address	<del></del>	<del></del>	Street Address	· · · · · · · · · · · · · · · · · · ·			
3 LEE ANN DRIVE			.3 LEE ANN DRIVE				
City	State	Zip	City	State	Zip		
BARRINGTON	RI	02806	. BARRINGTON	RI	02806		
9. NAMES AND ADDRES	SES OF THE DIR	RECTORS ("X" BOX FO	OR ATTACHMENT)   FILL IN SPA	CES BEFORE USING	ATTACHMENTS		
Director Name			Director Name				
LEWIS J. SURIANI			Sireei Address	ROSEMARY SURIANI			
Street Address			3 LEE ANN DRIVE				
3 LEE ANN DRIVE	State	Zip	·City	State	Zip		
Ciny BARRINGTON	RI	02806	BARRINGTON	RI	02806		
Director Name			Director Name				
			•				
Street Address			·Sireei Address				
				16	Zip		
City	State	Zip	.Ciry	State	) Z.p		
10. SHARES AUTHORIZ	ED WY BOY FOR	ATTACUMENTS O	11. SHARES ISSUED ("X" B	OY FOR ATTACHME			
AUTHORIZED SHARES	ED ["X"BOX FOR	AT INCHMENT) U	ISSUED SHARES	OX TORALIMENTE	"/ L		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value		
			600	COMMON	NO PAR		
600 NO PAR VALUE			600	COMMON	NO FAR		
		·····					
his report must be sign	ed in ink by eith	er the President, Vic	e Presideni, Secretary, Assista	nt Secretary, Treas	urer, Receiver or Trus		
II. 01010 OKUL 01	1EI B(I						
1: 1: 1: 1: 1: 1: 1: 1: 1: 1: 1: 1: 1: 1			Under penalty of perjur	v. I declare and affirm	that I have examined		
			(his report, linelyding an	y accompanying sche	dules and statements,		
*4605 DBC 01/08/04 (	01:05:08 PM*		and that all statements of	contained herein are tr	ue and correct.		
	71.00.00 t W			m	HINLAL		
File Date		<b>-</b>			Thus UT		
Check No. 4215			Signature of Offices	. Suriani			
	<del></del>	-	Print or Type Name of Off	<u> </u>	<del> </del>		
Ву:	<u> </u>	_	President of the second				
FOR SECRETARY OF STATI	E USE ONLY			IE/U	Form 630 1		
			Title of Officer		rom 1001		



Edward S. Inman, III, Secretary of State Corporations Division 100 North Main Street, Providence, RJ 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 I	N BLACK)				
1. Corporate ID No. *4605*	2. Name of Corpor THE BUBBLI	otion E ROOM CAR WAS	SH, INC.		
3. Street Address Principal B 335 TAUNTON AVE.	· ·		City EAST PROVIDENCE	State RI	Zip 02914
4. Business Phone No.		5. State of Incorpora	lion		6. SIC Code
4014312100		RHODE ISLAN			8896
7. Brief Description of the Cl CAR WASH	haracter of Business Cond	fucted in Rhode Island			<del></del>
8. NAMES AND ADDR. President Name	esses of the off	ICERS ("X" BOX FOR	ATTACHMENT)   FILL IN SPACE	S BEFORE USING AT	TACHMENTS
LEWIS J. SURIAN			ROSEMARY SURIANI		
Sireei Address			Street Address		
3 LEE ANN DRIVE			. 3 LEE ANN DRIVE		
City	State	Zip	City	State	Zip
BARRINGTON	RI	02806	BARRINGTON	RI	02806
Secretary Name	_		Treasurer Name		
ROSEMARY SURIAN	[ 		LEWIS J. SURIANI	···	
Sircet Address 3 LEE ANN DRIVE			Street Address . 3 LEE ANN DRIVE		
City	State	Zip	City	State	Zip
BARRINGTON	RI	02806	. BARRINGTON	RI	02806
9. NAMES AND ADDR	ESSES OF THE DIR	ECTORS ("X" BOX FO	RATTACHMENT)   FILL IN SPA Director Name	CES BEFORE USING	ATTACHMENTS
LEWIS J. SURIAN	I		ROSEMARY SURIANI		
Street Address		Street Address			
3 LEE ANN DRIVE			3 LEE ANN DRIVE		
City	State	Zip	*City *BARRINGTON	State RI	Zip 02806
Director Name Street Address			Director Name Street Address		
City	State	Zip	City	State	Zip
			• • • • • • • • • • • • • • • • • • • •	OV FOR ATTACUMEN	<u></u>
10. SHARES AUTHOR	IZED ("X" BOX FOR	ATTACHMENT) U	11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)		
AUTHORIZED SHARES Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
i i i i i i i i i i i i i i i i i i i	Classocia				
600 NO PAR VALUE			600	СОММОИ	NO PAR
This report must be si	gned in ink by eithe	er the President, Vice	Under penalty of perjur	y, I declare and affirm	that I have examined
*4605 DBC1/21/032	_		and that all statements of	contained herein are tr	uc and correct.
File Date 2-3	-03	_	my Im	m	JUIZ
Check No.	30	_	Signature of Office LEWIS J	uRIANI	Date
Ву	Kmc		Print or Type Name of Off		
FOR SECRETARY OF ST	ATE USE ONLY	-	PRESIDENT		
FOR SECRETARY OF ST	MIE USE UNLT		Title of Officer		Form 630 12

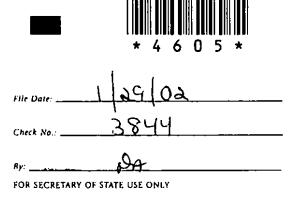
Edward S. Inman, III, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

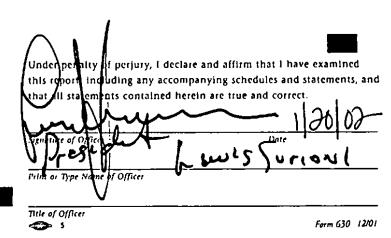
## PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002 Filing Period: January 1-March 1 • Filing Fee: \$50.00

STOP PLEASE READ INSTRUCTIONS

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(FORM MUST BE TYPED IN BLAC	K)			_	
1. Corporate ID No.	2. Name of Carporation	·		•	
4605	THE BUBBLE	ROOM CAR WASH, INC.			
<ol> <li>Street Address Principal Business Of 335 Taunton Avenu</li> </ol>			City East Providence	State RI	02914
4. Business Phone No. 401-431-2100		5. State of Incorporation RHODE ISLAND			6. SIC Cade <b>8896</b>
7. Brief Description of the Character o	of Business Conducted in R	hode Island			
car wash 8. NAMES AND ADDRESS President Name	ES OF THE OFFICE	ERS ("X" BOX FOR ATTACH	MENT) FILL IN SPACES BEF Vice President Name	ORE USING ATTACHM	IENTS
Lewis J. Suriani			Rosemary Suriani Street Address		
3 Lee Ann Drive  Chy Barrington	State RI	<sup>Zip</sup> 02806	3 Lee Ann Drive City Barrington	State RI	<sup>zıp</sup> 02806
Secretary Name		• • •	Treasurer Name		•
Rosemary Suriani			Lewis J. Suriani Street Address		
3 Lee Ann Drive			3 Lee Ann Drive		
Barrington	State RI	02806	Barrington	State RI	<sup>21p</sup> 02806
9. NAMES AND ADDRESS Director Name	ES OF THE DIREC	TORS ("X" BOX FOR ATTA	CHMENT) FILL IN SPACES B	EFORE USING ATTACE	HMENTS
Lewis J. Suriani Street Address			Rosemary Suriani Street Addless 3 Lee Ann Drive		
3 Lee Ann Drive  City Barrington	State RI	<sup>Zip</sup> 02806	c#Barrington	State RI	zip 02806
Director Name			Director Name	•	
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED AUTHORIZED SHARES	(*X* BOX FOR ATTAC	HMENT) 🛴	11. SHARES ISSUED ("x" R	OX FOR ATTACHMENT)	
Number of Shares	Class/Serles	Par Value	Number of Shares	Class/Series	Par Value
600 NO PAR VALUE			. 600	common	no par value
			1		

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





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

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1. Corporate ID No.

2. Name of Corporation

4605

THE BUBBLE ROOM CAR WASH, INC.

3. Street Address Principal Business Office

State

335 Taunton Avenue 4. Business Phone No.

5. State of Incorporation

RI

02914

401-431-2100

RHODE ISLAND

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

car wash

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

President Name

Lewis J. Suriani

Street Address

3 Lee Ann Drive

Rosemary Suriani

3 Lee Ann Drive

Secretary Name

Street Address

City

Zip

City

3 Lee Ann Drive

State

ZIP

Barrington

RI

02806

Barrington

Vice President Name

East Providence

RI

02806

Treasurer Name

Street Address

Lewis J. Suriani

Rosemary Suriani

Street Address

3 Lee Ann Drive

Barrington

RI

State

02806

02806.

City Barrington

RI

RΙ

State

State

02806

02806

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

Director Name

Lewis J. Suriani

Street Address

3 Lee Ann Drive

Barrington

Director Nan

NONE

Street Address

City

State

RI

Rosemary Suriani Street Address

3 Lee Ann Drive City

Barrington

Director Name

NONE

Street Address

City

State

Zip

Zip

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

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

Zip

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

ESSLIED SHARES

Number of Shares

Class/Series

Par Value

600

common

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

600 NO PAR VALUE

TATE 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 hereingire true and correct.

Signature of

Title of Officer

Form 630 12/00

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

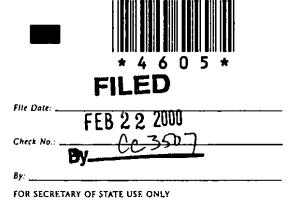
## PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000 Filing Period: January 1-March 1 • Filing Fee: \$50.00

STOP PIE VI RE VID PANIRLE FIDAN

		•			
(FORM MUST BE TYPED IN BLAC	K)				
1. Corporate ID No.	2. Name of Corporation				
4605	BUBBLE ROOM	CAR WASH, INC.,	, THE		
3. Street Address Principal Business O	ffice		City	State	Zip
335 Taunton Aven	ue		East Providence	RI	02914
4. Business Phone No.		5. State of Incorporation			6. SIC Code <b>8896</b>
401-431-2100		RHODE ISLAND			8870
7. Brief Description of the Character c	of Business Conducted in Rh	ode Island			
car wash					
8. NAMES AND ADDRESS	ES OF THE OFFICE	RS (*X* BOX FOR ATTACH		ORE USING ATTAC	HMENTS
President Name			Vice President Name		
Lewis J. Suriani Street Address			Rosemary Suriani		
			Street Address		
3 Lee Ann Drive	State	Zip	3 Lee Ann Drive	State	Zip
•		02806	•		·
Barrington Secretary Name	ŖĮ	. 02000	Barrington Treasurer Name	RI	02806
Rosemary Suriani			Lewis J. Suriani		
Street Address			Street Address		
3 Lee Ann Drive			3 Lee Ann Drive		
City	State	Zip	City	State	Zip
Barrington	RI	02806	Barrington	RI	02806
9. NAMES AND ADDRESS	ES OF THE DIRECT	CORS ("X" BOX FOR ATTAC	•	EFORE USING ATTA	ACHMENTS
Director Name			Director Name		
Lewis J. Suriani			Rosemary Suriani		
_			Street Address		
3 Lee Ann Drive	· <u>-</u>		3 Lee Ann Drive	_	_
City	State	Zip	City	State	Zip
Barrington	RI	02806	Barrington	RI	02806
Director Name			Director Name		
none Street Address			none Street Address		
JULEEL MUDICSS			Jilett Addity		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED	) ("X" BOX FOR ATTACH	IMENT)	11. SHARES ISSUED (*x* i	BOX FOR ATTACHMENT	")
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
600 SHS NO PAR VA	L		600	common	no par value

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

Title of Officer



Under pegalty of perjusy, I doctare and affirm that I have examined this report, including my accompanying schedules and statements, and that all statements contained herein are true and correct.

Signiture of Officer

Print or Type Name of Officer

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

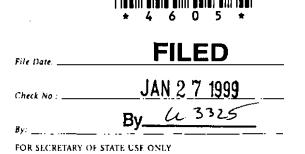
## PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1999 Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

L. Commente ID No.

i. Corporate 1D 110.	2. Junte of Corpora	HION.			
4605	BUBBLE RO	OOM CAR WASH, INC.,	THE		
l Street Address Principal Business ()			City	State	<sup>Ζίρ</sup> 0291 <b>4</b>
335 Taunton Avenue	2		East Providence	RI	02914
F Business Phone No		5. State of Incorporation			6. SIC Code
401-431-2100		RHODE ISLAND			8896
7 Brief Description of the Character of Car Wash	f Business Conducted (	in Rhode Island			
B. NAMES AND ADDRESSI resident Name Lewis J. Suriani	ES OF THE OFF	ICERS (*x* box for attache	MENT) FILL IN SPACES BEF Vice President Name Rosemary Suriani	ORE USING ATTAC	CHMENTS
itrect Address 464 Maple Avenue			Street Address 464 Maple Avenue		
City Barrington	State RI	Zip 02806	City Barrington	State RI	<sup>Zip</sup> 02806
Rosemary Suriani			Treasurer Name Lewis J. Suriani	.•	
itreet Address 464 Maple Avenue			Street Address 464 Maple Avenue		
ាក្ Barrington	State RI	<sup>zip</sup> 02806	City Barrington	State RI	<sup>Zip</sup> 02806
9. NAMES AND ADDRESS Director Name Lewis J. Suriani	ES OF THE DIR	ECTORS ("X" BOX FOR ATTAC	CHMENT) FILL IN SPACES BI Director Name Rosemary Suriani	EFORE USING ATT	ACHMENTS
Street Address 464 Maple Avenue			Street Address 464 Maple Avenue		
City Barrington	State RI	<sup>Z.ip</sup> 02806	City Barrington	State RI	<sup>Zip</sup> 02806
Director Name None		•	Director Name None		
Street Address			Street Address		
City	State	Zip .	City	State	Zip
10. SHARES AUTHORIZED AUTHORIZED SHARES	("X" BOX FOR ATT	TACHMENT)	11. SHARES ISSUED ("X" B	OX FOR ATTACHMEN	T)
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
600 SHS NO PAR VAL	•		600	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 penalthof perjury, I declare and affirm that I have examined report including any accompanying schedules and statements, and this contained herein are true and correct. Lèwis J. Print or Type Name of Officer President Title of Officer

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

### PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1998

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

(FORM MUST BE TYPED IN BLACK)

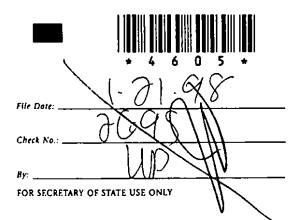
1. Corporate ID No.

2. Name of Corporation

BUBBLE ROOM CAR WASH, INC., THE 4605 State ZIp 3. Street Address Principal Business Office 02914 RI East Providence 335 Taunton Avenue 6. SIC Code 5. State of Incorporation 4. Business Phone No. RHODE ISLAND 8898 401-431-2100 7. Brief Description of the Character of Business Conducted in Rhode Island 8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) Vice President Name President Name Rosemary Suriani Lewis J. Suriani Street Address Street Address 464 Maple Avenue 464 Maple Avenue State City State Zio 02806 RI 02806 Barrington RI Barrington Treasurer Name Secretary Name Lewis J. Suriani Rosemary Suriani Street Address Street Address 464 Maple Avenue 464 Maple Avenue City ZIp City State State 02806 RI 02806 Barrington RI Barrington 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) Director Name Director Name Rosemary Suriani Lewis J. Suriani Street Address Street Address 464 Maple Avenue 464 Maple Avenue State City State 02806 RI 02806 Barrington Barrington RI Director Name Director Name none none Street Address Street Address Zip City State State ZIP City 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) 10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) ISSUED SHARES AUTHORIZED SHARES Number of Shares Class/Series Par Value Number of Shares Class/Series Par Value

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

600



**600 SHS NO PAR VAL** 

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.

Standaute of Office

Lewis J Suriani

Print or Type Name of Officer

Title of Officer

common

no par value



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

#### PROFIT CORPORATION ANNUAL REPORT 1997 Filing Period: January 1-March 1 • Filing Fee: \$50.00

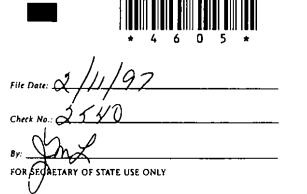
(FORM MUST BE TYPED IN BLACK) 1. Corporate ID No. 2. Name of Corporation BUBBLE ROOM CAR WASH, INC., THE 4605 3. Street Address Principal Business Office State Zip East Providence RI 02914 335 Taunton Avenue 4. Business Phone No. 6. SIC Cade S. State of Incorporation RHODE ISLAND 8896 401-431-2100 7. Brief Description of the Character of Business Conducted in Rhode Island 8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) President Name Vice President Name Rosemary Suriani Lewis J. Suriani Street Address Street Address 464 Maple Avenue 464 Maple Avenue City 210 State State Zip 02806 Barrington 02806 RT Barrington Secretary Name Treasurer Name Lewis J. Suriani Rosemary Suriani Street Address Street Address 464 Maple Avenue 464 Maple Avenue City State CIII 02806 RΙ 02806 RI Barrington Barrington 9. NAMES AND ADDRESSES OF THE DIRECTORS (\*X\* BOX FOR ATTACHMENT) Director Name Rosemary Suriani Lewis J. Suriani Street Address Street Address 464 Maple Avenue 464 Maple Avenue City City State State Zip 02806 02806 Barrington RΙ Barrington RI Director Name Director Name none none Street Address Street Address City State Zip City State ZIP

ESSUED SHARES

Number of Shares

600

Title of Officer



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

Class/Series

Par Value

AUTHORIZED SHARES

600 SHS NO PAR VAL

Number of Shares

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee Under penalty of porjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and Signature of Officer Date Lewis J. Sudiani Print or Type Name of Officer President

Class/Series

common

Par Value

no par value

### **PROFIT CORPORATION ANNUAL REPORT**

For Secretary of State Use Only

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

335 Taunton Avenue  East Providence RI  8. STATE OF INCORPORATION RHODE ISLAND  Car wash  B. NAMES AND ADDRESSES OF THE OFFICERS  MCC PRESIDENT NAME  Lewis J. Suriani  Rosemary Suriani	02914
335 Taunton Avenue  BUSINESS PHONE NO  BUSINESS PHONE NO  BUSINESS PHONE NO  Car wash  8. HAMES AND ADDRESSES OF THE OFFICERS  PRESIDENT NAME  Lewis J. Suriani  BOP CODE  BISTORY  BIST Providence  RI  Car wash  RHODE ISLAND  B. HAMES AND ADDRESSES OF THE OFFICERS  MICE PRESIDENT NAME  ROSEMARY SURIANI  ROSEMARY SURIANI  ROSEMARY SURIANI	02914 56E
335 Taunton Avenue  BUSINESS PHONE NO.  BUSINESS PHONE NO.  CAT WASh  B. HAMES AND ADDRESSES OF THE OFFICERS  MICE PRESIDENT NAME  Lewis J. Suriani  East Providence RI  Cast Providence RI  B. SECTOR  RHODE ISLAND  B. HAMES AND ADDRESSES OF THE OFFICERS  MICE PRESIDENT NAME  Rosemary Suriani	02914 56E
S. STATE OF INCORPORATION  401-431-2100  7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND  car wash  8. MAMES AND ADDRESSES OF THE OFFICERS  MCE PRESIDENT NAME  Lewis J. Suriani  Rosemary Suriani	DOE
RHODE ISLAND  401-431-2100  7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED WIRHOUS ISLAND  car wash  8. HAMES AND ADDRESSES OF THE OFFICERS  MICE PRESIDENT NAME  Lewis J. Suriani  Rosemary Suriani	DOE
401-431-2100 7. BRUEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED WIRHOOF ISLAND  CAR WASh  8. HAMES AND ADDRESSES OF THE OFFICERS  MICE PRESIDENT NAME  Lewis J. Suriani  Rosemary Suriani	8896
Car wash  8. HAMES AND ADDRESSES OF THE OFFICERS  WICE PRESIDENT NAME  Lewis J. Suriani  Rosemary Suriani	8896
8. HAMES AND ADDRESSES OF THE OFFICERS  WICE PRESIDENT HAME  Lewis J. Suriani  Rosemary Suriani	
RESIDENT NAME  Lewis J. Suriani  Rosemary Suriani	
RESIDENT NAME  Lewis J. Suriani  Rosemary Suriani	
Lewis J. Suriani Rosemary Suriani	
STREET ADDRESS STREET ANDRESS	
464 Maple Avenue 464 Maple Avenue	<del>,</del>
January 1 ar and 1 ar	02806
Barrington RI 02806 Barrington RI SECRETARY NAME	02800
Rosemary Suriani Lewis J. Suriani	
STREET ADDRESS STREET ADDRESS	
464 Maple Avenue 464 Maple Avenue	
3.00	
Barrington RI 02806   Barrington RI C	02806
DIRECTOR NAME	
Lewis J. Suriani Rosemary Suriani	
TREET ADDRESS STREET ADDRESS	
464 Maple Avenue 464 Maple Avenue	
January Januar	: 2806
Barrington RI 02806 Barrington RI 02	2000
STREET ADORESS STREET ADORESS,	
OITY STATE ZIP COOK OITY STATE 12P COOK	<del>,</del>
January 1 and 1 an	
10. SHARES AUTHORIZED AND ISSUED	غسنه يرجستست
AUTHORIZED SHARES ISSUED SHARES	•• . •
MUMBER OF SHARES CLASS / SERIES PAR VALUE NUMBER OF SHARES CLASS / SERIES	PAR VALUE
600 SHS NO PAR VAL	_
500 common no	par value
;	····
This report must be SIGNED IN INK by Gither that	·
This report must be SIGNED IN INK by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee	
President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee	
President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee	d statements, and th
President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee	d statements, and th
President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee	d statements, and th
President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee	d statements, and th
President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee	d statements, and th
President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee  Under penalty of petiury, I declare and affirm that report, including any accompanying schedules and all statements contained herein are true and correct.	d statements, and th

Title of Officer

Date

#### 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

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

Corporate ID: 0004605	Annual Report for the year: 1995
Name of Corporation: BUBBLE ROOM CAR W	
Business entity organized under the laws of the State of:	Business Entity is (check one):
Rhode Island	[X] Business Corporation (See RIGL Chapter 7-1.1)
	[] Professional Service Corporation (See RIGL Chapter 7-5.1)
For foreign entity, address and telephone number of principal office:	() Control of the political (See 14.52 Chapter 7.5.1)
•	Brief statement of the character of business conducted in Rhode Island: a car wash

Phone:

Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):

335 Taunton Avenue East Providence, RI

Phone: (401) 431-21100

	THE NAMES OF THE OFFIC	CERS ARE;	
PRESIDENT	STREET ADDRESS	CITY/STATE	ZIP CODE
Lewis J. Suriani	464 Maple Avenue	Barrington, RI	02806
VICE PRESIDENT	STREET ADDRESS	CITY/STATE	ZIP CODE
Rosemary Surjani	464 Maple Avenue	Barrington, RI	02806
SECRETARY	STREET ADDRESS	· CITY/STATE	ZIP CODE
Rosemany Suriani	464 Maple Avenue	Barrington, RI	02806
TREASURER	STREET ADDRESS	CITY/STATE	ZIP CODE
<u>Lewis J. Suriani</u>	464 Maple Avenue	Barrington, RI	02806
	THE NAMES OF THE DIR	ECTORS ARE:	
NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
<u>Lewis J. Suriani</u>	464 Maple Avenue	Barrington, RI	02806
NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
Rosemary Suriani	464 Maple Avenue	Barrington, RI	02806
NAME	STREET ADDRESS	CITY/STATE	ZIP CODE

NUMBER OF SHARES AUTHORIZE	D (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	500	Common
		1	
	e de la constantina		
	MAR 9 1995		/
Date3/	19 <u>95 + 46#35 1253</u>	THE BUBBLE ROOM CAR	WASH, INC.
1 /	7 (S. 7 ) DO 10 0 00	/ · / / /	
		PRINT OR TYPE NAME OF	OF OFFICER SIGNING
Form 31 1/95		TITLE OF OFFICER SIGN	ling

DESIGNATED REGISTERED AGENT FOR SERVICE OF PROCESS:

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

2700 Hospital Trust Tower Providence, RI 02903

#### PLEASE TYPE or PRINT

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

#### State of Rhode Island and Providence Plantations Office of The Secretary of State

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

Corporate ID: _	0004605		Annual Report for	the year:		1994	
Name of Busine	ess Entity:		BUBBLE	ROOM C	AR WASH,	INC.,	THE
Business entity or	eanized under the laws of the State of _	Rhode Island	Business Entity	is (check on	c).		
	Identification Number:_		1		ation (See RIG		
For foreign entity, address and telephone number of principal office			1		vice Corporatio Company (See		. Chapter 7-5-1)
			Name, title and communication	-	ess of contact p	erson to who	m
			Lewis J. St	riani			
			464 Maple /	Avenue			
Phone ( )			Barrington	RI 02806			
Address and teleph	hone of the principal office of business e	ntity in Rhode					
Island (Provide str	reet address - Not P.O. Box) <sup>2</sup>		Brief statement	of the charac	ter of business	conducted in	Rhode Island:
			a_car_wash				
335 Taunton	Avenue						
East Provid	lence, RI		Date of Organi.	zation: Mor	ch 24, 1987		
Phone ( 401 )_	431-2110				usiness in Rhoo		oreign cetity):
		THE NAMES OF TI	L HE OFFICERS A	RE:	• •		
	OFFICER ON B PRESIDENT (Check One)	STREET ADD	ORi SS	c)r	TYMTATE.		z r coné
Lewis J. Suri	BIN F COSTICER OR - (X - VICE PRESIDENT (Check Over	464 Maple Av			igton, RI		02806 Z:FCODE
Rosemary Suri		Sixeer Aug 464 Maple Av			nskie ogton, Rl		02806
CUSTODIAN OF RE	CORDS ON TO SECRETARY (Check One)	STREET ADD	MESS.		INSTATE.		Z.P CODE
Rosemery Suri		464 Maple Av			gton, RI		02806
Lewis J.Suria	OFFICER OR TO TREASURER (Check One	STREET ADI 464 Maple Av			IV/S:ATE		7:PCODE 02806
		HE NAMES OF TH			ngton, RI	<b>-</b> ·	
NAME		DOATHAS:2			TY/STATE		Z,P (10)#
Rosemary Suri	eni	464 Maple Av			gton, RI		C2806
Lewis J. Suri	ani	STREET ADE 464 Maple Av			TYSTATE ngton, RI		ZIP CODE 02806
NAME		STREET ADD			TATATE		21F CODE
			·				
NUMBER OF SE	HARES AUTHORIZED (If Applicable	<b>)</b>	NUMBER OF SH	ARES ISSUE	D AND OUTS	TANDING (	lf Applicable)
NUMBER	600		NUMBER	500			
CLASS	Сотпол		CLASS	Солно	1		
SERIES	K/A		SERIES	N/A			
PAR VALUE OR WITHOUT PAR			PAR VALUE OR ; WITHOUT PAR	No Par	~ Value		
	<u> </u>	TH'( By	BBLE FOOT CAR W	ASH, INC.			
Date	. 19 . 94.		is 1/ lim	<u> </u>	<del>-</del> .		
		PRINT (0.7)	THE SAME OF OFFICER SID	701,000	<u> </u>		
		1	PERSONNE				
		TOTAL DE OF	JIN PR BIODIOU.				
Form 31 1/94							
	DESIGNATED REGIST	ERED OR RESIDE	ENT AGENT FOR	SERVICE	OF PROCE	SS:	

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.

BARRY G. HITTNER 2700 HOSPITAL TRUST TOWER PROVIDENCE RI 02903

## State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

Corporate ID	1505	Annual Report for the	year 1999
FIRST: The name of t	he corporation is	BUBBLE ROOM CAR V	ASH, INC. THE
SECOND: It is incorpo	orated under the laws of	hode Island	
THIRD: Character of	business, briefly stated, is	ar wash	
FOURTH: If foreign co	-	incipal office "/a	
FIFTH: Business addre		ospital Trust Tower, Providenc	
SIXTH: Names and ac	ddresses of its directors and		(Attach rider if necessary) umber, street, zip code)
Lewis J. Suriani	Director	464 Maple Avenue, Barrington	n, RI
Rosemary Suriani	Director	464 Maple Avenue, Barrington	n, RI
	Director		
Lewis J. Suriani	President	As above	
Rosemary Suriani	Vice Preside	nt as above	
Rosemary Suriani	Secretary	As above	
Lewis J. Suriani	Treasurer	As above	
SEVENTH: Number of	Shares authorized:	Series	Par Value or statement that shares are without par value
600		Rec'd & Filed FFR 1518	
Eighth: Number of	Shares issued:	They a	Par Value or statement that shares are without
No. of Shares 500	Class	Series Q W	parvalue no paryvälue
Dated February	<u>9</u> 19 93 <u>I</u>	HE BUBLE ROOM CAR WASH, INC.	~
(Report must be sig	ned by an officer) 'I	itle	

## State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903 EN #1121

Corporate ID	000460 <del>5</del>	Annual Report for the	he year1.맞옷을
FIRST: The name	e of the corporation is		AR-WASH, INC., THE
Second: It is in	corporated under the laws of	Rhode Island	
THIRD: Characte	er of business, briefly stated, is	car wash	
FOURTH: If fore	ign corporation, address of its pri	ncipal office n/a	
FIFTH: Business	address in Rhode Island		
2700 Hospital	Trust Tower, Provide	nce, Rhode Island	02903
SIXTH: Names a	nd addresses of its directors and		(Attach rider if necessary) number, street, zip code)
Lewis J. Suri	ani Director	464 Maple Ave., B	Barrington, RI
Rosemary Suri	ani Director	464 Maple Ave., I	Barrington, RI
	Director		
Lewis J. Suri	ani President	As above	············
Rosemary Suri	ani Vice Preside	nt As above	
Rosemary Suri	ani Secretary	As above	
Lewis J. Suri	ani Treasurer	As above	
Seventh: Numb	ber of Shares authorized:		Par Value
No. of Shares	Class	PAID	or statement that shares are without par value
600	common	FEB 2 6 1002	no par value
		SEC'Y OF STATE	
Еіднтн: Numbe	er of Shares issued:		Par Value or statement that
No. of Shares	Class	Series	shares are without par value
500	common		no par value
Dated Leb.	23 19 92	THE BUBBLE ROOM CA	AR WASH, INC.
(Report must	be signed by an officer)  B T	Dosemary A.	uriani
Form 31 1/85	or signed of an order)	<del>Preside</del> nt	······································

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

Corporate ID	0004605	Annual Report for	the year1.99.1
FIRST: The name	e of the corporation is	eueele koom c	AR WASH, INC, THE
	,		······································
SECOND: It is in	corporated under the laws of	Rhode Island	•••••••••••••••••••••••••••••••••••••••
THIRD: Characte			······································
	ign corporation, address of its pi	rincipal officen/a	
		**	
2700 Hospital	Trust Tower, Provide	ence, Rhode Island	02903
SIXTH: Names as	nd addresses of its directors and		(Attach rider if necessary) ng number, street, zip code)
Lewis J. Suri	aniDirector	464 Maple Ave.	Barrington, RI
Rosemary Suri	ani Director	464 Maple Ave.	Barrington, RI
	Director		
Lewis J. Suri	aniPresident	As above	
Rosemary Suri	aniVice Preside	nt As above	······································
Rosemary Suri	ani Secretary	As above	
Lewis J. Suri	aniTreasurer	As above	
SEVENTH: Numb	per of Shares authorized:		Par Value or statement that
No. of Shares	Class	Series 1/4/4 06	shares are without par value
600	common	Cyo	no par value
EiGHTH: Numbe	r of Shares issued:	્યુ	Par Value or statement that
No. of Shares	Class	Series	shares are without par value
500 Dated	common 2/28 19 /	NAME OF THE PROOF OF	no par value
	27	NOTE THE BUSTOLE ROOM C	,
(Report must 1	be signed by an officer)	President	
		LIGOINGUL	

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

Corporate ID00046	505	Annual Report for the ye	1990 <b>ear</b>	
First: The name of	the corporation is BUBB	LE ROOM CAR WASH, INC.		
		Rhode Island		
SECOND: It is incorp	orated under the laws of	car wash	······································	
THIRD: Character of	business, briefly stated, is			
FOURTH: If foreign o	corporation, address of its pr	n/a rincipal office		
FIFTH: Business addr 2700 Hospital	ess in Rhode Island Trust Tower, Provi	dence, Rhode Island O	2903	
SIXTH: Names and a	ddresses of its directors and		(Attach rider if necessary)	
Lewis J. Surian		464 Maple Ave., Ba	r. street, zip.code) r.r.ington, RI	
Rosemary Suriar	Director Director	464 Maple Ave., Ba	rrington, RI	
Lewis J. Suriar	Director	As above		
Rosemary Suriar	President	As above		
Rosemary Suriar	Vice Preside		·····	
	Secretary			
Lewis J. Surian	Treasurer	As above		
SEVENTH: Number of	Shares authorized:		Par Value	
No of Shares	Class	Sprigs of 18 8 mg	or statement that shares are without par value	
600	common	FEB 20 (88)	no par value	
EIGHTH: Number of S	Shares issued:	STON, OF STATE	Par Value	
No. of Shares	Class	Senes	or statement that shares are without par value	
500	common	7	no par value	
Dated Fe Jamy	) 1990	THE BUBBLE ROOM CAR	WASH, INC.	
(Report must be sign	By an officer	ille Prosident		

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

Corporate ID	0004505		Annu	al Report for the	year	<b>;</b> 
First:	The name of the c	orporation is	EVEELE F	OOM CAR WAS	H, INC.,	THE
SECOND	: It is incorporate	d under the laws of	Rhode Isla	nd		
Third:	Character of busi	ness, briefly stated, is	car wash		·····	
Fourth	: If foreign corpo	ration, address of its p	orincipal office	n/a		
<b>Г</b> і <b>гт</b> н:	Business address in	n Rhode Island			••••••	
2700 Hos	pital Trust	Tower, Provide	nce, Rhode	Island 029	903	
Ѕіхтн:	Names and address	sses of its directors an	d officers:	Address (including num	•	h rider if necessary) de)
Lewis J.	Suriani	Director	464 Mapl	e Ave., Barı	ington,	RI
Rosemary	Suriani	Director	464 Mapl	e Ave., Barr	ington,	RI
		Director	***************************************		••••••	•••••
Lewis J.	Suriani	President	As above		***************************************	,
Rosemary	Suriani	Vice Presid	lentAs above			••••••
Rosemary	Suriani	Secretary	As above		***************************************	
Lewis J.	Suriani	Treasurer	As above		••••••	
Seventi	i: Number of Sha	res authorized:				Value
No. of Sh	ares	Class	Ser	ies	shares a	re without value
600		common	<u>.</u> ₩.4	PAID	no pa	r value
Еіснтн:	Number of Shar	es issued:		FEB 2 % 188	Par	Value
No. of Sh	ares	Class	Ser	ies	shares a	re without value
500 Dated 2	-/1/	common			_	r value
	eport must be signed b	y an officer)	By Title Presid	E ROOM CAR V	WASH, IN	c.

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION 270 WESTMINSTER MALL PROVIDENCE, RHODE ISLAND 02903

Corporate ID.	4605	5	Annua	l Report for the	year19	88
	The name of the corporation					
	•			•	**************	
SECOND:	It is incorporated under	the laws of	Rhode Is	Land	***************	
THIRD:	Character of business, brie					
Fourth:	If foreign corporation, ac	dress of its	principal office	N√a	•••••••••••••••••••••••••••••••••••••••	
Fігтн: I	Business address in Rhode	Island			•••••••	······································
2	700 Hospital Trus	t Tower	, Providence	RI 02903	•••••••	********
Sіхтн: 1	Names and addresses of its	directors a		Address (including num		ch rider if necessary)
Lewis J.	Suriani	. Director	464 Maple	Ave, Barri	•	
Rosemary	Suriani	Director		as	above	•••••••
		Director	•••••••	***************************************	**********	
Lewis J.	Suriani	. President	**************************	As	above	•••••
Rosemary	Suriani	. Vice Presi	ident			
Rosemary		_		As		***************************************
Lewis J.		. Treasurer			above	
Seventh:	Number of Shares author	rized:				Value
No. of Share	rs Class		Series		shares a	ement that are without r value
600	common		PAI	li)	no par	
Еіднтн:	Number of Shares issued:		MAK 11	1900	Dav	Value
No. of Share			SEC'Y. OF Series	74~~	or state shares a	ement that are without
500	common		ocno.	1	no par va	value alue
Dated - Dr	uary 9 19E	3S	THE BUBBLE (Name of Corporation)	HOOM CAR WA		
(Repo	ort must be signed by an officer	)	By Uu Presid	Lum~ ent		312.00