

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

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 2. Name of Corporation
97105 Star Relocation Network Alliance, Inc.
3. Street Address Principal Business Office City State Zip
2 Energy Way W WARWICK RI 02893
4. Business Phone No. 5. State of Incorporation 6. SIC Code
4018288111 RHODE ISLAND 6638

7. Brief Description of the Character of Business Conducted in Rhode Island
TO ENGAGE IN THE BUSINESS OF PROVIDING RELOCATION SERVICES OF ALL TYPES, BOTH INTRASTATE AND INTERSTATE.

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

President Name	Vice President Name
David Arpin	Paul Arpin
Street Address	Street Address
115 Pheasant Drive	257 Howland Road
City State Zip	City State Zip
East Greenwich RI 02818	East Greenwich RI 02818
Secretary Name	Treasurer Name
David Arpin	Paul Arpin
Street Address	Street Address
Same as above	Same as above
City State Zip	City State Zip

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

Director Name	Director Name
David Arpin	Paul Arpin
Street Address	Street Address
Same as above	Same as above
City State Zip	City State Zip
East Greenwich RI 02818	East Greenwich RI 02818
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
8,000 \$1.00 PAR VALUE

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

ISSUED SHARES
Number of Shares Class/Series Par Value
2,000 Common \$1.00

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



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97105 DBC 01/15/05 11:09 AM
FILED
File Date MAR 14 2005 272375
Check No. By [Signature]
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 of Officer [Signature] Date 2-21-05
David Arpin
Print or Type Name of Officer
President
Title of Officer
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 OR PRINTED IN BLACK)

1. Corporate ID No. 97105		2. Name of Corporation Star Relocation Network Alliance, Inc.			
3. Street Address Principal Business Office 99 James P. Murphy Highway, West Warwick Industrial Park		City West Warwick		State RI	Zip 02893
4. Business Phone No. 401-828-8111		5. State of Incorporation RHODE ISLAND			6. SIC Code 6638
7. Brief Description of the Character of Business Conducted in Rhode Island TO ENGAGE IN THE BUSINESS OF PROVIDING RELOCATION SERVICES OF ALL TYPES, BOTH INTRASTATE AND INTERSTATE.					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name David Arpin			Vice President Name Paul Arpin		
Street Address 115 Pheasant Drive			Street Address 257 Howland Road		
City East Greenwich	State RI	Zip 02818	City East Greenwich	State RI	Zip 02818
Secretary Name David Arpin			Treasurer Name Paul Arpin		
Street Address See Above			Street Address See Above		
City	State	Zip	City	State	Zip
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name David Arpin			Director Name Paul Arpin		
Street Address See Above			Street Address See Above		
City	State	Zip	City	State	Zip
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
8,000	\$1.00 PAR VALUE		2,000	Common	\$1.00

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



FILED

File Date

MAR 01 2004

Check No.

By: Matthew A. Brown

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

David Arpin

Print or Type Name of Officer

President

Title of Officer



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.

2. Name of Corporation

97105

Arpin Relocation Services, Inc.

3. Street Address Principal Business Office

99 James P. Murphy Highway
West Warwick Industrial Park

City

West Warwick

State

RI

Zip

02893

4. Business Phone No.

401-828-8111

5. State of Incorporation

RHODE ISLAND

6. SIC Code

6638

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

Relocation Services

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

FILL IN SPACES BEFORE USING ATTACHMENTS

President Name

David Arpin

Street Address

115 Pheasant Drive

City

State

RI

Zip

02818

Secretary Name

David Arpin

Street Address

See Above

City

State

Zip

Vice President Name

Paul Arpin

Street Address

257 Howland Road

City

East Greenwich

State

RI

Treasurer Name

Paul Arpin

Street Address

See Above

City

State

Zip

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

FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

David Arpin

Street Address

See Above

City

State

Zip

Director Name

Paul Arpin

Street Address

See Above

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

8,000 \$1.00 PAR VALUE

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

ISSUED SHARES

Number of Shares

Class/Series

Par Value

2,000

Common

\$1.00

FILED

MAR 18 2003

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

By

315569



* 9 7 1 0 5 *

File Date: _____

Check No.: _____

By: _____

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer

Date

David Arpin

Print or Type Name of Officer

President

Title of Officer

5

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 2002

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.

2. Name of Corporation

97105

Arpin Relocation Services, Inc.

3. Street Address Principal Business Office

99 James P. Murphy Highway
West Warwick Industrial Park

City

West Warwick

State

RI

Zip

02893

4. Business Phone No.

401-828-8111

5. State of Incorporation

RHODE ISLAND

6. SIC Code

6638

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

Relocation Services

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

President Name

David Arpin

Street Address

115 Pheasant Drive

City

East Greenwich

State

RI

Zip

02818

Vice President Name

Paul Arpin

Street Address

257 Howland Road

City

East Greenwich

State

RI

Zip

02818

Secretary Name

David Arpin

Street Address

See Above

City

State

Zip

Treasurer Name

Paul Arpin

Street Address

See Above

City

State

Zip

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

Director Name

David Arpin

Street Address

See Above

City

State

Zip

Director Name

Paul Arpin

Street Address

See Above

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

8,000 \$1.00 PAR VALUE

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

ISSUED SHARES

Number of Shares

Class/Series

Par Value

2,000

Common

\$1.00

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



* 9 7 1 0 5 *

File Date: 7-3-02

Check No.: 97105

By: DAF

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.

David Arpin 7-30-02
Signature of Officer Date

David Arpin

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. **97105** 2. Name of Corporation **Arpin Relocation Services, Inc.**

3. Street Address Principal Business Office
99 James P. Murphy Highway
West Warwick Industrial Park

City West Warwick State RI Zip 02893

4. Business Phone No.

5. State of Incorporation
RHODE ISLAND

6. SIC Code
86638

(401) 828-8111

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

Relocation Services

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

President Name

David Arpin

Street Address

115 Pheasant Drive

City State Zip
East Greenwich RI 02818

Secretary Name

David Arpin

Street Address

See Above

City State Zip

Vice President Name

Paul Arpin

Street Address

257 Howland Road

City State Zip
East Greenwich RI 02818

Treasurer Name

Paul Arpin

Street Address

See Above

City State Zip

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

Director Name

David Arpin

Street Address

City State Zip

Director Name

Paul Arpin

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
8,000	\$1.00	PAR VALUE

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

ISSUED SHARES

Number of Shares	Class/Series	Par Value
2,000	Common	\$1.00

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



* 9 7 1 0 5 *

File Date: _____

Check No.: _____

By: _____

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

David Arpin 3-2-01
Signature of Officer Date

David Arpin
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 FOR THE YEAR 2000

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 97105		2. Name of Corporation Arpin Relocation Services, Inc.	
3. Street Address Principal Business Office 99 James P. Murphy Highway West Warwick Industrial Park		City West Warwick	State RI
4. Business Phone No. (401) 828-8111		5. State of Incorporation Rhode Island	Zip 02893
6. SIC Code 6638			
7. Brief Description of the Character of Business Conducted in Rhode Island Relocation Services			
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT)			
President Name David Arpin		Vice President Name Paul Arpin	
Street Address 115 Pheasant Drive		Street Address 257 Howland Road	
City East Greenwich	State RI	City East Greenwich	State RI
Secretary Name David Arpin		Treasurer Name Paul Arpin	
Street Address See Above		Street Address See Above	
City	State	City	State
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT)		11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)	
Director Name David Arpin		ISSUED SHARES	
Street Address See Above		Number of Shares 2,000	
City	State	Class/Series Common	
Director Name		Par Value \$1.00	
Street Address			
City	State		
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)			
AUTHORIZED SHARES			
Number of Shares 8,000		Class/Series Common	
Class/Series \$1.00 PAR VALUE		Par Value \$1.00	

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

FILED

File Date: APR 13 2000
Check No.: 0040507
By: _____

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer: David Arpin Date: 4-10-00
Print or Type Name of Officer: David Arpin
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
401-222-3040



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. 97105		2. Name of Corporation Arpin Relocation Services, Inc.	
3. Street Address, Principal Business Office 99 James P. Murphy Highway West Warwick Industrial Park		City West Warwick	State RI
4. Business Phone No. (401) 828-8111		5. State of Incorporation RHODE ISLAND	6. SIC Code 6638
7. Brief Description of the Character of Business Conducted in Rhode Island Relocation Services			
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name David Arpin		Vice President Name Paul Arpin	
Street Address 115 Pheasant Drive		Street Address 257 Howland Road	
City East Greenwich	State RI	City East Greenwich	State RI
Zip 02818		Zip 02818	
Secretary Name David Arpin		Treasurer Name Paul Arpin	
Street Address See Above		Street Address See Above	
City	State	City	State
Zip		Zip	
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
Director Name David Arpin		Director Name Paul Arpin	
Street Address See Above		Street Address See Above	
City	State	City	State
Zip		Zip	
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		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	Number of Shares	Class/Series
8,000 \$1.00 PAR VALUE		2,000	Common
			\$1.00

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



File Date: 7/21/99
Check No.: 38407
By: cu

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: David Arpin Date: 7-19-99
Print or Type Name of Officer: David Arpin
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. 97105		2. Name of Corporation Arpin Relocation Services, Inc.			
3. Street Address Principal Business Office 99 James P. Murphy Highway		City West Warwick	State RI	Zip 02893	
4. Business Phone No. 401-828-8111		5. State of Incorporation RHODE ISLAND		6. SIC Code 6638	
7. Brief Description of the Character of Business Conducted in Rhode Island Relocation Services					
8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>					
President Name David Arpin		Vice President Name Paul Arpin			
Street Address 115 Pheasant Drive		Street Address 257 Howland Road			
City East Greenwich	State RI	Zip 02818	City East Greenwich	State RI	Zip 02818
Secretary Name David Arpin		Treasurer Name Paul Arpin			
Street Address See Above		Street Address See Above			
City See Above	State See Above	Zip See Above	City See Above	State See Above	Zip See Above
9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>					
Director Name David Arpin		Director Name Paul Arpin			
Street Address See Above		Street Address See Above			
City See Above	State See Above	Zip See Above	City See Above	State See Above	Zip See Above
Director Name See Above		Director Name See Above			
Street Address See Above		Street Address See Above			
City See Above	State See Above	Zip See Above	City See Above	State See Above	Zip See Above
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
8,000	\$1.00 PAR VALUE		2,000	Common	\$1.00

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



* 9 7 1 0 5 *

File Date: **7-24-98**

Check No.: **35531**

By: **AMF**

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.

David Arpin 7/17/98
Signature of Officer Date

David Arpin
Print or Type Name of Officer

President
Title of Officer