



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 OR PRINTED IN BLACK)

1. Corporate ID No. 93507		2. Name of Corporation KCM FLAVORS, INC.			
3. Street Address Principal Business Office 389 Warwick Avenue			City Warwick	State RI	Zip 02888
4. Business Phone No. 401-467-7390		5. State of Incorporation RHODE ISLAND			6. SIC Code 2381
7. Brief Description of the Character of Business Conducted in Rhode Island MAKE FLAVORS FOR SODA BOTTLING COMPANIES AND CAMERA REPAIRS					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Keith J. Fortin			Vice President Name Mark A. Fortin		
Street Address 112 Longmeadow Avenue			Street Address 56 Weeks Avenue		
City Warwick	State RI	Zip 02888	City Cumberland	State RI	Zip 02864
Secretary Name Keith J. Fortin			Treasurer Name Mark A. Fortin		
Street Address 112 Longmeadow Avenue			Street Address 56 Weeks Avenue		
City Warwick	State RI	Zip 02889	City Cumberland	State RI	Zip 02864
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Keith J. Fortin			Director Name Mark A. Fortin		
Street Address 112 Longmeadow Avenue			Street Address 56 Weeks Avenue		
City Warwick	State RI	Zip 02889	City Cumberland	State RI	Zip 02864
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
1,000 \$1.00 PAR VALUE	Common	NPV	1000	Common	NPV

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



FILED

File Date
FEB 23 2005 5894

Check No.
By KB-

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

Keith J. Fortin

Print or Type Name of Officer

President

Title of Officer



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Matthew A. Brown, Secretary of State

Corporations Division
100 North Main Street
Providence, RI 02903-1331
401.222.3041

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. 93507		2. Name of Corporation KCM FLAVORS, INC.			
3. Street Address Principal Business Office 389 Warwick Avenue			City Warwick	State RI	Zip 02888
4. Business Phone No. 401-467-9390		5. State of Incorporation RHODE ISLAND			6. SIC Code 2881
7. Brief Description of the Character of Business Conducted in Rhode Island MAKE FLAVORS FOR SODA BOTTLING COMPANIES AND CAMERA REPAIRS					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Keith J. Fortin			Vice President Name Mark A. Fortin		
Street Address 112 Longmeadow Avenue			Street Address 56 Weeks Avenue		
City Warwick	State RI	Zip 02889	City Cumberland	State RI	Zip 02864
Secretary Name Keith J. Fortin			Treasurer Name Mark A. Fortin		
Street Address 112 Longmeadow Avenue			Street Address 56 Weeks Avenue		
City Warwick	State RI	Zip 02889	City Cumberland	State RI	Zip 02864
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Keith J. Fortin			Director Name Mark A. Fortin		
Street Address 112 Longmeadow Avenue			Street Address 56 Weeks Avenue		
City Warwick	State RI	Zip 02889	City Cumberland	State RI	Zip 02864
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
1,000 \$1.00 PAR VALUE	Common	NPV	1000	Common	NPV

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



* 9 3 5 0 7 *

File Date	2/17/04
Check No.	5327
By:	18,
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

2/13/04
Date

Keith J. Fortin

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.

93507

2. Name of Corporation

KCM FLAVORS, INC.

3. Street Address Principal Business Office

389 Warwick Avenue

City

Warwick

State

RI

Zip

02888

4. Business Phone No.

401-467-7390

5. State of Incorporation

RHODE ISLAND

6. SIC Code

2881

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

Makes flavors for sode bottling companies and Camera Repairs

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

President Name

Keith J. Fortin

Vice President Name

Mark A. Fortin

Street Address

Street Address

112 Longmeadow Avenue

56 Weeks Avenue

City

City

State

State

Zip

Warwick

RI

02889

Cumberland

RI

02864

Secretary Name

Treasurer Name

Keith J. Fortin

Mark A. Fortin

Street Address

Street Address

112 Longmeadow Avenue

56 Weeks Avenue

City

City

State

State

Zip

Warwick

RI

02889

Cumberland

RI

02864

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

Director Name

Director Name

Keith J. Fortin

Mark A. Fortin

Street Address

Street Address

112 Longmeadow Avenue

56 Weeks Avenue

City

City

State

State

Zip

Warwick

RI

02889

Cumberland

RI

02864

Director Name

Director Name

Street Address

Street Address

City

City

State

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

1,000 \$1.00 PAR VALUE

1000

Common

NPV

Common

NPV

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



* 9 3 5 0 7 *

File Date: 2/4/03

Check No.: 4725

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]
Signature of Officer

2/3/03
Date

KEITH FORTIN
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 2002

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **93507** 2. Name of Corporation **KCM FLAVORS, INC.**
3. Street Address Principal Business Office **389 Warwick Avenue** City **Warwick** State **RI** Zip **02888**
4. Business Phone No. **401-467-7390** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **2881**

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

Makes flavors for soda bottling companies and Camera Repairs

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

President Name

Keith J. Fortin

Street Address

112 Longmeadow Avenue

City **Warwick** State **RI** Zip **02889**

Secretary Name

Keith J. Fortin

Street Address

112 Longmeadow Avenue

City **Warwick** State **RI** Zip **02889**

Vice President Name

Mark A. Fortin

Street Address

56 Weeks Avenue

City **Cumberland** State **RI** Zip **02864**

Treasurer Name

Mark A. Fortin

Street Address

56 Weeks Avenue

City **Cumberland** State **RI** Zip **02864**

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

Director Name

Keith J. Fortin

Street Address

112 Longmeadow Avenue

City **Warwick** State **RI** Zip **02889**

Director Name

Mark A. Fortin

Street Address

56 Weeks Avenue

City **Cumberland** State **RI** Zip **02864**

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

1,000 \$1.00 PAR VALUE
Common NPV

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

ISSUED SHARES

Number of Shares Class/Series Par Value

1000
Common NPV

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



* 9 3 5 0 7 *

File Date: 1/24/02

Check No.: 4138

By: ONE

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.

Keith Fortin 1/22/02
Signature of Officer Date

KEITH FORTIN
Print or Type Name of Officer

PRESIDENT
Title of Officer

5

Form 630 12/01



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. **93507** 2. Name of Corporation
KCM FLAVORS, INC.

3. Street Address Principal Business Office City State Zip
389 Warwick Avenue **Warwick** **RI** **02888**

4. Business Phone No. 5. State of Incorporation 6. SIC Code
(401) 467-7390 **RHODE ISLAND** **2881**

7. Brief Description of the Character of Business Conducted in Rhode Island
Make flavors for soda bottling companies and Camera repairs.

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

President Name Keith J. Fortin Street Address 112 Longmeadow Avenue City State Zip Warwick RI 02889	Vice President Name Mark A. Fortin Street Address 56 Weeks Avenue City State Zip Cumberland RI 02864
---	--

Secretary Name Keith J. Fortin Street Address 112 Longmeadow Avenue City State Zip Warwick RI 02889	Treasurer Name Mark A. Fortin Street Address 56 Weeks Avenue City State Zip Cumberland RI 02864
---	---

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

Director Name Keith J. Fortin Street Address 112 Longmeadow Avenue City State Zip Warwick RI 02889	Director Name Mark A. Fortin Street Address 56 Weeks Avenue City State Zip Cumberland RI 02864
--	--

Director Name Street Address City State Zip	Director Name Street Address City State Zip
---	---

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

AUTHORIZED SHARES **1000**
Number of Shares **1000** Class/Series **Common** Par Value **NPV**
1,000 \$1.00 PAR VALUE

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

ISSUED SHARES **1000**
Number of Shares **1000** Class/Series **Common** Par Value **NPV**

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



* 9 3 5 0 7 *

File Date: 2/13

Check No.: 3564

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] 2/13/01
Signature of Officer Date
Keith J. Fortin **2/13/01**
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
401-222-3040



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. **93507** 2. Name of Corporation **KCM FLAVORS, INC.**
3. Street Address Principal Business Office **389 Warwick Avenue** City **Warwick** State **RI** Zip **02888**
4. Business Phone No. **(401) 467-7390** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **2881**
7. Brief Description of the Character of Business Conducted in Rhode Island

Make flavors for soda bottling companies and camera repairs.

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

President Name Keith J. Fortin Street Address 112 Longmeadow Avenue City Warwick State RI Zip 02889	Vice President Name Mark A. Fortin Street Address 56 Weeks Avenue City Cumberland State RI Zip 02864
Secretary Name Keith J. Fortin Street Address 112 Longmeadow Avenue City Warwick State RI Zip 02889	Treasurer Name Mark A. Fortin Street Address 56 Weeks Avenue City Cumberland State RI Zip 02864

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

Director Name Keith J. Fortin Street Address 112 Longmeadow Avenue City Warwick State RI Zip 02889	Director Name Mark A. Fortin Street Address 56 Weeks Avenue City Cumberland State RI Zip 02864
Director Name Street Address City State Zip	Director Name Street Address City State Zip

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

AUTHORIZED SHARES **1000**
Number of Shares **1000** Class/Series **Common** Par Value **NPV**
1,000 \$1.00 PAR VALUE

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

ISSUED SHARES **1000**
Number of Shares **1000** Class/Series **Common** Par Value **NPV**

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



* 9 3 5 0 7 *

File Date: 02/3/00

Check No.: 2956

By: zc

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.

Keith J. Fortin 1-28-2000
Signature of Officer Date
KEITH J. FORTIN
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
401-222-3040



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 **93507** 2. Name of Corporation **KCM FLAVORS, INC.**
3. Street Address Principal Business Office **389 Warwick Avenue** City **Warwick** State **RI** Zip **02888**
4. Business Phone No **(401) 467-7390** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **2881**
7. Brief Description of the Character of Business Conducted in Rhode Island

Make flavors for soda bottling companies and camera repairs.

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

President Name Keith J. Fortin Street Address 112 Longmeadow Avenue City Warwick State RI Zip 02889	Vice President Name Mark A. Fortin Street Address 56 Weeks Avenue City Cumberland State RI Zip 02864
Secretary Name Keith J. Fortin Street Address 112 Longmeadow Avenue City Warwick State RI Zip 02889	Treasurer Name Mark A. Fortin Street Address 56 Weeks Avenue City Cumberland State RI Zip 02864

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

Director Name Keith J. Fortin Street Address 112 Longmeadow Avenue City Warwick State RI Zip 02889	Director Name Mark A. Fortin Street Address 56 Weeks Avenue City Cumberland State RI Zip 02864
City _____ State _____ Zip _____	City _____ State _____ Zip _____

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

AUTHORIZED SHARES **1000**
Number of Shares **1000** Class/Series **Common** Par Value **NPV**
1,000 \$1.00 PAR VALUE

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

ISSUED SHARES **1000**
Number of Shares **1000** Class/Series **Common** Par Value **NPV**

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



File Date: Jan 20 1999
Check No.: 2350
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] 1/2/99
Signature of Officer Date
Keith J. Fortin
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 **1998**

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.

93507

2. Name of Corporation

KCM FLAVORS, INC.

3. Street Address Principal Business Office

389 Warwick Avenue

City

Warwick,

State

RI

Zip

02888

4. Business Phone No.

(401) 467-7390

5. State of Incorporation

RHODE ISLAND

6. SIC Code

2881

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

Make flavors for soda bottling companies and camera repairs.

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

President Name

Keith J. Fortin

Street Address

112 Longmeadow Avenue

City

Warwick

State

RI

Zip

02889

Vice President Name

Mark A. Fortin

Street Address

56 Weeks Avenue

City

Cumberland

State

RI

Zip

02864

Secretary Name

Keith J. Fortin

Street Address

112 Longmeadow Avenue

City

Warwick,

State

RI

Zip

02889

Treasurer Name

Mark A. Fortin

Street Address

56 Weeks Avenue

City

Cumberland

State

RI

Zip

02864

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

Director Name

Keith Fortin

Street Address

112 Longmeadow Avenue

City

Warwick,

State

RI

Zip

02889

Director Name

Mark A. Fortin

Street Address

56 Weeks Avenue

City

Cumberland

State

RI

Zip

02864

Director Name

Street Address

City

State

Zip

Director Name

Street Address

City

State

Zip

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

AUTHORIZED SHARES

1000

Number of Shares

1000

Class/Series

Common

Par Value

NPV

1,000 \$1.00 PAR VALUE

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

ISSUED SHARES

1000

Number of Shares

1000

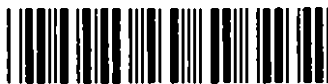
Class/Series

Common

Par Value

NPV

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



* 9 3 5 0 7 *

File Date:

2.17.98

Check No.:

1752

By:

100

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

KEITH FORTIN

Print or Type Name of Officer

PRESIDENT

Title of Officer

Date

2/12/98