

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	ANNIIAI.	REPORT	FOR	THE VEAR	
	COM CMILLOIN	annoau	MELOIL	I VIX		

2005

Filing Period: January 1 - M (FORM MUST BE TYPED OR PRI		Fee: \$50.00	. •		
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			2381
7 Brief Description of the Character MAKE FLAVORS FOR S	ODA BOTTLING COM	PANIES AND CAMERA F	REPAIRS		
8. NAMES AND ADDRESSES President Name Keith J. For		("X" BOX FOR AITAG	CHMENT) [] FILL IN SPA Vice President Name Mark A. Fortin	CES BEFORE USING A	TTACHMENTS
Sircei Address Longmead	low Avenue		56 Weeks Avenu	e	-
City Warwick	State RI	^{Zip} 02888	Cumberland	State RI	^{Zip} 02864
Secretary Name Keith J. For	tin		Treasurer Name Mark A. Fortin		
Sircel Address 112 Longmead	low Avenue		Sinci Addres 56 Weeks Avenu	e	
Warwick	State RI	^{Zip} 02889	Cumberland	State RI	^{Zip} 02864
9. NAMES AND ADDRESSES	OF THE DIRECTOR	S: ("X" BOX FOR ATT		ACES BEFORE USING	ATTACHMENTS
Keith J. For	tin		Mark A. Fortin		=·
Street Address 112 Longmead	low Avenue		Sirect Address 56 Weeks Avenue		
Warwick	State RI	^{2/p} 02889	Cumberland	State RI	02864
Director Name		• •	Director Name		
Street Address			Sireci Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED AUTHORIZED SHARES	 ("X" BOX FOR ATTA	CHMENT)	11. SHARES ISSUED ("X"	 BOX FOR ATTACHME	 (זאַ
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Scrics	Par Value
1,000 \$1.00 PAR VALUE	Common	NPV	1000	Common	NPV
File Date File Date FEB 2 3 Check No. By FOR SECRETARY OF ST.	D 2005 5894 -	r the President, Vice Pr		I declare and affirm that I ying schedules and stateme and correct.	have examined this report
		·	Title of Officer		



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

Corporations Division 100 North Main Stree Providence, RI 02903-133: 401.222.3041

Matthew A. Brown, Secretary of State

FOR SECRETARY OF STATE USE ONLY

2004 Filing Period: January 1 - March 1 Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRIM	TED IN BIACK)					
1. Corporate ID No.	2. Name of Corporation					
93507	KCM FLAVORS, II	NC.				
3. Street Address Principal Business O. 389 Warwick Av	•		Guy Warwick	State RI	^{Zφ} 02888	
4. Business Phone No.		5. State of Incorporation			6. SIC Code	
401-467-9390		RHODE ISLAND		•	2881	
7 Brief Description of the Character of MAKE FLAVORS FOR SO	f Business Conducted in R DA BOTTLING COMP	hode Island				
8. NAMES AND ADDRESSES	OF THE OFFICERS:	("X" BOX FOR AT	TACHMENT) FILL IN S	PACES BEFORE USING	ATTACHMENTS	
Prosident Name			Vice President Name			
Keith J. Forti	in		Mark A. Forti	.n		
Street Address 112 Longmeadov	Avenue		Street Address 56 Weeks Aven	ue		
city Warwick	State RI	Zip 02889	Cumberland	State RI	^{Zip} 02864	
Socretary Name Reith J. Forti	iņ		Treasurer Name Mark A. Forti	.n		
Street Address 112 Longmeadov	v Avenue		Street Address 56 Weeks Aver	nue		
City Warwick	State RI	2φ 02889	Ciny Cumberland	State RI	02864	
9. NAMES AND ADDRESSES	OF THE DIRECTOR	S: ("X" BOX FOR A	TTACHMENT) FILL IN	SPACES BEFORE USI	NG ATTACHMENTS	
Director Name Keith J. Fort:	in		Director Name Mark A. Forti	n		
Street Address 112 Longmeadov	Avenue		Street Address 56 Weeks Aver	nue		
City . 1	State ,	Zip	City	State	Zip	
Warwick	J RI	02889	Cumberland	RI	02864	
Director Name	•		Director Name			
Street Address			Street Address			
	Louis	T 7/2	Cir	I Company	12/5	
City	State	Ζφ	City	State	Zip	
10. SHARES AUTHORIZED	'"X" BOX FOR ATTA	CHMENT)	11. SHARES ISSUED (*	X" BOX FOR ATTACH	MENT)	
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 s	igned in ink by eithe	er the President, Vice	President, Secretary, Assistan	L Secretary, Treasurer,	Receiver or Trustee	
·			·	·		
! 486118 1811	IN INCLUMENT COM TRACTICAL					
			Under penalty of peri	ury, I declare and affirm th	nat I have examined this repor	
+ 0	3 5 0 7 *	,	including any accomp	panying schedules and stat	ements, and that all statemen	
ر ا ا ا ا	-]	contained herein are t	rue and correct.	al .	
File Date 7 17 04			Kui .	Forta	2/13/04	
(2) 13			Signature of Officer	7	Date	
Check No. 307			Keith J. F	ortin		
lav. 125			Prins or Type Name of Officer			

President

Title of Officer

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

orth Main Street, Providence, RI 02903-1335 401-222-3040

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PROFIT COR Filing Period: Januar			EPORT FOR THE	YEAR 200	ST PLEASI ENSTRUC
(FORM MUST BE TYPED OR PRI	NTED IN BLACK)				
1. Corporate ID No.	2. Name of Corporati	on			_
93507	KCM FLAVOR	RS, INC.			
3. Street Address Principal Busine	ss Office		City	State	Zip
389 Warwick 4. Business Phone No.	Avenue	5. State of Incorporation	Warwick	RI	02888 6. SIC Code
401-467-739 7. Brief Description of the Charac		RHODE ISLAN	ND		2881
Makes flavo 8. NAMES AND ADDRE President Name	rs for sode ESSES OF THE OFFICE	bottling con CERS (*X* BOX FOR ATT.	npanies and Camera ACHMENT) FILL IN SPACES BI Vice President Name	a Repairs EFORE USING ATTAC	HMENTS
Keith J. Fo Street Address	rtin		Mark A. Forti	in	
112 Longmea	dow Avenue State	Zip	56 Weeks Aver	lue State	Zip
Warwick Secretary Name	ŖI	02889	Cumberland	RI	02864
Keith J. Fo	rtin		Mark A. Forti	n	
112 Longmea	dow Avenue State	Zip	56 Weeks Aven	iue State	Zip
Warwick 9. NAMES AND ADDRE	RI ESSES OF THE DIREC	02889 CTORS ("X" BOX FOR A	Cumberland TTACHMENT) FILL IN SPACES Director Name	RI BEFORE USING ATTA	02864 ACHMENTS
Keith J. Fo	rtin		Mark A. Fort	in	
112 Longmea	dow Avenue	Zip	, city 56 Weeks Ave	nue State	Zip
Warwick Director Name	RI	02889	Cumberland Director Name	RI	02864
Street Address			Street Address		
City	State	Zip	City	State	Złp
10. SHARES AUTHORIZ AUTHORIZED SHARES	ED (*X* BOX FOR ATTAC	CHMENT)	11. SHARES ISSUED (*X	* BOX FOR ATTACHMENT	7
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
4 000 84 00 040 941 115	•		i		
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

Title of Officer

€

	* 9 3 5 0 7 *
File Date:	2/4/03
Check No.:	4725
Ву:	
FOR SECRETARY O	F 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

Print or Type Name of Officer

Form 630 12102

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

ROFIT	CORPORATION	ANNUAL	REPORT	FOR	THE	YEAR	2002
lima Daniad	. Languagu 1 March 1 .	Pilling Page 800					

CLOKW	WO21	n E	1	rrev	IN	BLAC

1. Corporate ID No.

2. Name of Corporation

93507

KCM FLAVORS, INC.

3. Street Address Principal Business Office

City

Warwick

State

RI

Zip

389 Warwick Avenue 4. Business Phone No.

5. State of Incorporation

02888

401-467-7390

RHODE ISLAND

6. SIC Code 2881

02864

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) Vice President Name

FILL IN SPACES BEFORE USING ATTACHMENTS

President Name

Keith J. Fortin

Keith J. Fortin

Keith J. Fortin

Street Address

Secretary Name

Street Address

Street Address

Director Name

Street Address

City

City

City

112 Longmeadow Avenue

112 Longmeadow Avenue

112 Longmeadow Avenue

State

State

State

City Warwick

RI

02889

56 Weeks Avenue

Mark A. Fortin

City

Street Address

RI

Zip

Trensurer Name

Mark A. Fortin

Cumberland

Street Address

56 Weeks Avenue State

Warwick RI 02889 Cumberland

02864 RT

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

RI ·

FILL IN SPACES BEFORE USING ATTACHMENTS

Mark A. Fortin

Street Address

56 Weeks Avenue

Cumberland

02889

City

State

RI

02864

Director Name

Street Address

City

State

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)

ISSUED SHARES

Number of Shares

Class/Series

Par Value

1,000 \$1.00 PAR VALUE

Common

NPV

1000

Common

Under penalty of perjury, I declare and affirm that I have examined

NPV

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



FOR SECRETARY OF STATE USE ONLY



this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

ture 9f Off

EITH FORTIN

YKKSIDENT Title of Officer **4** 5 5

Form 630 12/01

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)

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.	S. State of Incorporation			6.5889de

(4UL) 40/~	7390				
7. Brief Description of the Charac	cter of Business Conducted	in Rhode Island			
Make flavo	rs for soda	bottling com	panies and Camera	repairs.	
3. NAMES AND ADDRI	ESSES OF THE OFF	FICERS ("X" BOX FOR ATTA	ACHMENT) FILL IN SPACES B	EFORE USING ATT	ACHMENTS
Keith J. F	ortin		Mark A. Forti	in	
treet Address	_ 1		Street Address		
112 roudme	adow Avenue		56 Weeks Aver	nue	
City	State	Zip	City	State	Zip
Warwick	RI	02889	Cumberland	RI	0286
ecretary Name			Treasurer Name	•	
Keith J. F	ortin		Mark A. Forti	in	
treet Addiess			Street Address		•
112 Longme	adow Avenue	!	56 Weeks Aver	nue	
City	State	Zip	City	State	Zip
Warwick	RI	02889	Cumberland	RI	0286
. NAMES AND ADDRI	ESSES OF THE DIR	LECTORS ("X" BOX FOR A	TACHMENT) FILL IN SPACES	S BEFORE USING AT	=

Director Name Director Name Keith J. Fortin Mark A. Fortin Street Address

112 Longmeadow Avenue

City

Warwick RI 02889 Director Name

Street Address City

Street Address

City State Zip

State

RI

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

1000

Class/Serie Common

NPV

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

Cumberland

Director Name

56 Weeks Avenue

Class/Series Common

2/13/01

Zip

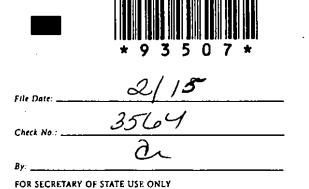
NPV

02864

4

1,000 \$1.00 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 all statements contained herein are true and correct. Signature of Office

Keith J. Fortin 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 401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000

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

(FORM	MHCT	RF	TYPED	IN	BLACK)
ITUKM	MUDI	05	III	11.4	DIMUNI

1. Corporate ID No.

, 2. Name of Corporation

93507

KCM FLAVORS, INC.

3. Street Address Principal Business Office

389 Warwick Avenue

City

State

Wárwick

RI

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

Keith J. Fortin

Street Address

112 Longmeadow Avenue

Warwick

RI

02889

Mark A. Fortin

Street Address

Treasurer Name

Vice President Name

56 Weeks Avenue

City Cumberland

RI

02864

Secretary Name

Keith J. Fortin

Street Address

112 Longmeadow Avenue

City

State

Zip

Street Address 56 Weeks Avenue

Mark A. Fortin

City

State

RI

02864

RI 02889 Warwick Cumberland RT 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

Keith J. Fortin

Longmeadow Avenue

Warwick

RI

02889

Mark A. Fortin

Street Address

Director Name

56Weeks Avenue

Cumberland

Zio

02864

Director Name

Street Address

Street Address

City

Director Name

State

Zip

City

State

210

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

AUTHORIZED SHARES 1000

Number of Shares 1000

Class/Series Commonar Value

NPV

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

1000

ESSUED SHARES 1000

Number of Shares

Class/Serie:Common

1,000 \$1.00 PAR VALUE

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



FOR SECRETARY OF STATE USE ONLY

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

Resiper Title of Officer

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

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

(FORM MUST BE TYPED IN BLACK) 1. Corporate ID No 93507 KCM FLAVORS, INC. 3. Street Address Principal Business Office Cin State Zip 389 Warwick Avenue Warwick RΙ 02888 4. Business Phone No RHODE ISLAND (401) 467-7390 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 Vice President Name Mark A. Fortin Keith J. Fortin Street Address Street Address 112 Longmeadowa Avenue $_{c\bar{n}}$ 6 Weeks Avenue $_{state}$ Zip 02889 02864 Warwick RΙ Cumberland, RΙ . Secretary Name Treasurer Name Keith J. Fortin Mark A. Fortin Street Address 112 Longmeadow Avnue 56 Weeks Avenue City Zip 02889 02864 Warwick RI Cumberland RIFILL IN SPACES BEFORE USING ATTACHMENTS 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) Director Name Director Name Street A Wesith J. Fortin sMaxakessA. Fortin 112 Longmeadow Avenue 56 Weeks Avenue 02889 Warwick RΙ RΙ 02864 Cumberland Director Name Director Name · Street Address Street Address Cits State Zip State 10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) AUTHORIZED SHARES ISSUED SHARES 1000 1000 Number of Shares Class/Series Common Value Number of Shares Class/Series Common 1000 NPV 1000 NPV 1,000 \$1.00 PAR VALUE

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



FOR SECRETARY OF STATE USE ONLY

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

Keith J. Fortin

Print or Type Name of Officer

<u>President</u> Title of Officer

are of Office



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

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

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

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FORM	MUST	ΒE	TYPED	IN	BLACK)

1. Corporate ID No.

2. Name of Corporation

93507

KCM FLAVORS, INC.

3. Street Address Principal Business Office City 389 Warwick Avenue Warwick, RI 02888 4. Business Phone No. 5. State of Incorporation 6. SIC Code RHODE ISLAND 2881 (401) 467-7390

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) \(\sqrt{}

Vice President Name

Keith J. Fortin Mark A. Fortin Street Address Street Address

56 Weeks Avenue 112 Longmeadow Avenue City

City Warwick 02889 RΙ 02864 Cumberland

Secretary Name Treasurer Name

Keith J. Fortin Mark A. Fortin

Street Address Street Address

112 Longmeadow Avenue 56 Weeks Avenue

City State Warwick, 02889 02864 Cumberland RΙ

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

Director Name Director Name

Mark A. Fortin Keith Fortin

Street Address Street Address

112 Longmeadow Avenue 56 Weeks Avenue

State 02889 Warwick, RI RI 02864 Cumberland

Director Name

Street Address Street Address

City State ZIp City State Zio

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

AUTHORIZED SHARES ISSUED SHARES

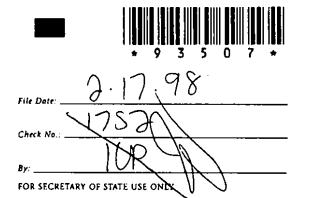
1000

Number of Shares Class/Series Common Par Value Number of Shares 1000 Class/Series Common Par Value NPV 1000

1,000 \$1.00 PAR VALUE

Director Name

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.

esh Signature of Officer

LESIDENT Title of Officer