

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  1. Carporate ID No.	IN BLACK)  2. Name of Cor	poration			<del></del>	
106509		ur & Sons Painting, In	ıc.			
3. Street Address Principal .	Business Office		City	State	Zip	
470 GASKILL STREET		WOONSOCKET	RI	02895-		
4. Business Phone No.		5. State of Incorpor	ration		6. SIC Code	
4017665988		RHODE ISLA	AND		0257	
7. Brief Description of the C TO PROVIDE GENERA	Character of Business C	onducted in Rhode Island RVICES TO THE GENI	ERAL PUBLICAND CONTRACT	rors.		
	RESSES OF THE O	FFICERS#("X":BOX FO	RATTACHMENT): FILLS IN SP	ACES BEFORE USING AT	TACHMENTS	
President Name			Vice President Name	21.00		
LORI ST.SAUVEUR			RODNEY ST. SAUVEUR  Street Address			
Sireei Address 470 GASKILL STR	) C C T		. 470 GASKILL STE	?EET		
	State	Zip	City	State	Zip	
City WOONSOCKET	RI	02895	. WOONSOCKET	RI	02895	
Secretary Name			Treasurer Name			
ERIC CHAMBERLAN	D		LUCIEN BROUILLE	TTE, JR.		
Street Address			* Street Address	* Street Address		
14 WEST PARK PL	ACE		.227 ST.LEON AVENUE			
City	State	Zip	*City	State	Zip	
WOONSOCKET	RI	02895	WOONSOCKET	RI	02895	
9. NAMES AND ADDI Director Name	RESSES OF THE D	IRECTORS ("X" BOX F	ORATTACHMENT) TILL IN .  Director Name	SPACES BEFORE USING	ATTACHMENTS	
LORI ST. SAUVEUR	<b>≀</b>		•			
Street Address		······································	Street Address			
470 GASKILL STR	EET		•			
City	State	Zip	•City	State	Zip	
WOONSOCKET	RI	02895		<b>.</b>	<b>.  </b>	
Director Name			· Director Name			
Street Address			Sireei Address			
City	State	Zip	.City	State	Zip	
in spance Withou	DIZED, C'Y" ROY E	 OR ATTACHMENT):□ '"-	SAME SHARES ISSUED (72	Y" BOX FOR ATTACHME:	vn Π	
AUTHORIZED SHARES	KILED (X. DOXII	ZICAT IACTORIANT TO THE	ISSUED SHARES			
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value	
1,000 COMM NO P	AR VALUE		500	COMMON	NO PAR	
· · · · · · · · · · · · · · · · · · ·		<del></del>				
This report must be s	igned in ink by ei	ther the President, Vic	ce President, Secretary, Assi	stant Secretary, Treas	urer, Receiver or Trus	
AL HEN ARI	IS BURL BUIL ESTER FOL					
	<u>                                     </u>					
			Linder penalty of ne	rjury, I declare and affirm	that I have examined	
, ,	0 , 0 ,		this report, includin	g any accompanying sche	dules and statements.	
	4/05 00:44:40 51		and that all statemen	nts confained berein are tr	ue and correct.	
*106509 DBC 02/0	-1/05 03:41:49 PN	Λ <sup>-</sup>	Un.	1 V 1/2	9-2-	
File Date			1 Jour	WILL EX	~ 201	
Check No.		Signature of Officer Date				
		YORI ST.S.				
MAK	₹ 1 4 2005		Print or Type Name o			
B <u>y:</u>		<del></del>	PRESIDEN	IT		
FOR SECRETARY OF ST	TATE USE ONUSPLY		Title of Officer		Form 630	

Title of Officer

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

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

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No.

2. Name of Corporation

106509

4. Business Phone No.

St. Sauveur & Sons Painting, Inc.

3. Street Address Principal Business Office

470 Gaskill Street

City

State

Zip

S. State of Incorporation

Woonsocket

RI

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401-766-5988

RHODE ISLAND

0257

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

Painting and wallcovering

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

President Name

Lori St.Sauveur

Lori St.Sauveur

Street Address

Secretary Name

Street Address

470 Gaskill Street

470 Gaskill Street

Woonsocket

RI

ZIP

02895

Rodney St.Sauveur Street Address

470 Gaskill Street

Woonsocket

State RI

02895

Zip

Treasurer Name

Lucien Brouillette Jr.

Street Address

227 St.Leon Avenue

Woonsocket

RT

02895

Woonsocket

RI

02895

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

Director Name

Lori St.Sauveur

Street Address

470 Gaskill Street

Woonsocket

RI

Zip

City

State

210

Director Name

02895

Director Name

Street Address

Street Address

Street Address

City

State

State

Zip

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

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

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

Class/Series

Par Value

1,000 COMM NO PAR VALUE

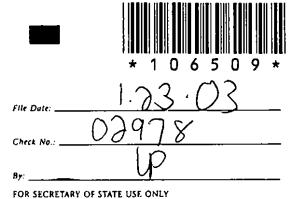
350

Number of Shares

Common

No par

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 coptained herein are true and correct. 1-23-2003 nature of Officer

Lori St. Sauveur
Print or Type Name of Officer

<u>President</u> Title of Officer

Form 630 12/02



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

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P11 VSE ENVERUO	
INSTRUC	HONS

ining remode, juniory					
(FORM MUST BE TYPED IN BLAC					
1. Corporate ID No.	2. Name of Corporation		•		
106509 3. Street Address Principal Business C	St.Sauveur & Office	Sons Painting,	Inc. City	State	Zip
470 Gaskill Stree	et	5. State of Incorporation	Woonsocket.	RI	02895 6. SIC Code
401-766-5988 7. Brief Description of the Character (	of Business Conducted in R	Rhode Island	and		0257
Painting & pape	er hanging				
8. NAMES AND ADDRESS President Name	SES OF THE OFFICE	ERS (*X* BOX FOR ATTACE	HMENT) (FILL IN SPACES BEF	ORE USING ATTAC	HMENTS
Loci St.Sauveur	-	·	: Rodney St.Sauveur		
470 Gaskill Stree	et		470 Gaskill Street		
City	State	Zip	City	State	l Zip
Woonsocket Secretary Name	. RI	02895	Woonsocket Treasurer Name	RI	02895
Eric Chamberland			Lucien Brouillette	Jr.	
Street Address	20		227 St.Leon Avenue	i	
14 West Pack Plac	State	Zip	· City	State	Zip
Woonsccket	RI	02895	Woonsocket	RI	02895
			ACHMENT) : FILL IN SPACES B		. 1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Lori. St.Sauveuc Sueet Address			Street Address		
470 Gaskill Stre	et		<u> </u>		
City	State	Zip	City	State	, Zip
Woonsocket	RI .	02895	Director Name		, , ,,
Street Address			: , Street Address	•	
City	State	Zip	City	* State	Zip
10. SHARES AUTHORIZEI	D ("X" BOX FOR ATTAC	HMENT)	11. SHARES ISSUED ("X" )	BOX FOR ATTACHMEN	77
AUTHORIZED SHARES Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
·			į		i
1,000	Common	No par	350	Common	No par
			1		
			<u> </u>	. Consider Trans	b D
This report must be sign	<b>ed in ink</b> by eithe	r the President, Vice	President, Secretary, Assista	nt Secretary, Treas	urer, Receiver or Iru

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.

Date: 3-7-0 2

1993

Lori St. Sauveur

Print or Type Name of Officer

President

FOR SECRETARY OF STATE USE ONLY

Check No.: .



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 YEAR2001 Filing Period: January 1-March 1 • Filing Fee: \$50.00

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(FORM MUST BE TYPED IN BLACE	()				
1. Corporate ID No. 509 3. Street Address Principal Business Of	2. Name of Corporation St. Sauveur	& sons Painting,	Inc.	State	Zip
			Woonsocket	RI	02895
470 Gaskill Str 4. Business Phone No.	eec	5. State of Incorporation	7.007.0007.00		6. SIC Code
401-766-5988 7. Brief Description of the Character of	Business Conducted in I	Rhode Island			0257
8. NAMES AND ADDRESSE	es to the pub S OF THE OFFIC		(ENT) · FILL IN SPACES BE	FORE USING ATT	ACHMENTS
President Name			· Vice President Name · Bodoon St. Savisour		
Lori St.Sauveur Street Address			Rodney St. Sauveur		
470 Gaskill St.			470 Gaskill St.		
City	State _	Zip	· City	State	21p 02895
Woonsocket	RI	02895	Woonsocket	RI	
Secretary Name	_		Theasurer Name Lori St.Sauveur		
Eric Chamberlan	d		Street Address		•
Street Address			470 Gaskill St.		
14 West Park Pl		**-		State	) 21p
Woonsocket	State RI	راہ 02895	: <sup>Chy</sup> Woonsocket	RI	02895
9. NAMES AND ADDRESSI Director Name Lori St.Sauveur Street Address			Director Name  * Street Address	BEFÖRE USING A	· ·•
470 (Park Place)	Caskill St.				
City	State	Zip	City	State	Zip
Woonsocket	RI	02895			
Director Name	• • •		Director Name	•_••••••	
Street Address			Street Address		
City	State	Zip	. City	<sup>+</sup> State	Zip
10. SHARES AUTHORIZED AUTHORIZED SHARES	(*X* BOX FOR ATTAC	CHMENT)	11. SHARES ISSUED (*X*	BOX FOR ATTACHM	ENT)
Number of Shares	Class/Series	Par Value	Number of Shares	Glass/Series	Par Value
1,000	Common	No par	300	Соптоп	No par
This report must be signe	d in ink by eithe	er the President, Vice P	resident, Secretary, Assist	ant Secretary, Tro	easurer, Receiver or Truste

Title of Officer



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

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(FORM MUST BE TYPED IN BLA	CK)				
1. Corporate ID No.	2. Name of Corpora	tion	•	•	
10/a504	St.Sauv	eur & Sons Pain	ting, Inc.		
3. Street Address Principal Business	Office		City	State	Zip
470 Gaskill Stre	et		Woonsocket	RI	02895
4. Business Phone No.		S. State of Incorporation			6. SIC Code
401-766-5988 7. Brief Description of the Character	of Business Conducted (		ode Island		0257
Painting service	es to general	. public and pub	lic contractors		
8. NAMES AND ADDRESS	SES OF THE OFF	CERS ("X" BOX FOR ATT	ACHMENT)		
President Nome			Vice President Name		
Lori St. Sauve	eur		Rodney St.Sauv	eur	
Street Address			Street Address		
470 Gaskill St			470 Gaskill St	•	
City	State	ZIp	City	State	Zip
Woonsocket	RI	02895	Woonsocket	RI	02895
Secretary Name	•		Treasurer Name	• • •	•
Eric Chamberla	and		Lori St.Sauver	ır	
14 West Park 9	Place		470 Gaskill St	, •	
City	State	Zip	City	State	Zip
Woonsocket	RI	02895	Woonsocket.	RI	02895
9. NAMES AND ADDRES	SES OF THE DIR	ECTORS ("X" BOX FOR A	TTACHMENT)		
Director Name			Director Name		
Lori St.Sauveur			Street Address		
470 Gaskill St.					
City	State	Zip	City	State	Zip
Woonsocket Director Name	RI	02895	Director Name		
Street Address			Street Address		
City	State	ZIp	City	State	Zip
10. SHARES AUTHORIZE	D ("X" BOX FOR ATT	FACHMENT)	11. SHARES ISSUED	(*X* BOX FOR ATTACHMENT)	ı
AUTHORIZED SHARES			ESTANTS (CETASS)		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1,000	Common	No par	300	Common	No par
		ı			

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

	this report, Incl
8-24-00	that all statemen
Check No.:	Signature of Officer
By: AMF	Print or Type Name
FOR SECRETARY OF STATE USE ONLY	President

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 beginning true and correct.

Signature of Officer

Date

Lori St Sauveur

Print or type Name of Officer