

Check No.

FOR SECRETARY OF STATE USE ONLY

Matthew A. Brown, Secretary of State Corporations Division 100 North Main Street, Providence, RJ 02903-1335 401.222.3040

Form 630 12/01

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

Filing Period: January 1 - March 1 • Filing Fee: \$50.00 (FORM MUST BE TYPED IN BLACK) 2. Name of Corporation 1. Corporate ID No. 4002 Charico, Incorporated 3. Street Address Principal Business Office City State Zip 232 Broadway Newport RI 02840 4. Business Phone No. 5. State of Incorporation 6. SIC Code 401-848-0878 Rhode Island 5538 7. Brief Description of the Character of Business Canducted in Rhode Island Real and tangible personal property holdings and investment 8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) | FILL IN SPACES BEFORE USING ATTACHMENTS President Name Vice President Name Harry C. Koulouvardis · Helen C. Nelson Street Address Street Address 232 Broadway -. 232 Broadway City State Zip City State Zip Newport RI 02840 Newport RI 02840 Secretary Name Treasurer Name Helen C. Nelson Harry C. Koulouvardis Street Address Sircei Address 232 Broadway .232 Broadway City State Zip City State 210 Newport RI 02840 Newport RI 02840 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) | FILL, IN SPACES BEFORE USING ATTACHMENTS Director Name None None Street Address Street Address Ciry State Zip City State Zip Director Name Director Name None None Street Address Street Address City Sale State Zip 10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) AUTHORIZED SHARES ISSUED SHARES Number of Shares Par Value Class/Serics Number of Shares Class/Series Par value 100 Comm No Par Value 65 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, systements contained herein are true and correct. 2-160-65 File Dute



FOR SECRETARY OF STATE USE ONLY

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

Form 630 12/01

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

Filing Period: January 1 - March 1 • Filing Fee: \$50.00 (FORM MUST BE TYPED IN BLACK) 1. Corporate ID No. 2. Name of Corporation Charlco, Incorporated 4002 3. Street Address Principal Business Office City State Zio 232 Broadway Newport RI 02840 4. Business Phone No. 5. State of Incorporation 6. SIC Code 401-848-0878 Rhode Island 5538 7. Brief Description of the Character of Business Conducted in Rhode Island Real and tangible personal property holdings and investment 8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) | FILL IN SPACES BEFORE USING ATTACHMENTS President Name Vice President Name Harry C. Koulouvardis · Helen C. Nelson Street Address Street Address 232 Broadway .232 Broadway City State Zip State Zip Newport RI 02840 Newport RI 02840 Secretary Name Treasurer Name Helen C. Nelson Harry C. Koulouvardis Street Address Street Address 232 Broadway .232 Broadway Cirv City State State Zip Ζiρ Newport RI 02840 Newport 02840 RI 2. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) I FILL IN SPACES BEFORE USING ATTACHMENTS Director Name Director Name None None Sireei Address Street Address City State Zip City Zip Director Name Director Name None None Street Address ·Sircei Address 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 100 Comm No Par Value Common No Par 65 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 confirmed herein are true and correct. File Date Check No. of Office

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 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK) 1. Corporate ID No.

2. Name of Corporation

4002 Charleo, Incorporated Zio 3. Street Address Principal Business Office City State 02840 RI 232 Broadway Newport S. State of Incorporation 6. SIC Code 4. Business Phone No. 401-848-0878 5538 **RHODE ISLAND** 7. Brief Description of the Character of Business Conducted in Rhode Island Real and Tangible personal property holdings and investment 8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) **FILL IN SPACES BEFORE USING ATTACHMENTS** Vice President Name President Name Helen C. Nelson Harry C. Koulouvardis Street Address Street Address 232 Broadway 232 Broadway City State Zip City RI 02840 RI 02840 Newport Newport Treasurer Name Secretary Name Harry C. Koulouvardis Helen C. Nelson Street Address Street Address 232 Broadway 232 Broadway City 02840 RI 02840 RI Newport Newport 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Director Name None None

Street Address Street Address

City State Zip City

Director Name Director Name None None Street Address Street Address

City State 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

100 COMM NO PAR VALUE

65

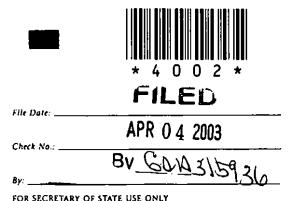
Common

State

No Par

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 Title 61 Form 630 12/02

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

STOP PLEASE READ INSTRUCTIONS

Filing Period: January	v 1-March 1 🔹	Filing Fee: \$50.0	0		INST
(FORM MUST BE TYPED IN BLA	4 <i>CK</i>)				
1. Corporate ID No.	2. Name of Corpor	ation			_
4002	Charlco, In	corporated			
3. Street Address Principal Business	Office		City	Sinte	ZIp
232 Broadway 4. Business Phone No.		5. State of Incorporat	Newport Newport	RI	02840 6. SIC Code
401-848-0878 7. Brief Description of the Characte	er of Business Conducted	RHODE ISLA in Rhode Island	AND		5538
Real and tangibl 8. NAMES AND ADDRES President Name	e personal page of the off	property holding FICERS (*X* BOX FOR AT	gs and investment TACHMENT) FILLIN SPACES Vice President Name	BEFORE USING ATTA	CHMENTS
Harry C. Koulouv	ardis		Helen C. Nelso	n	
232 Broadway	State	Zip	232 Broadway	State	Zip
Newport Secretary Name	RI.	02840.	Newport Treasurer Name	RI	02840
Helen C. Nelson			Harry C. Koulo	uvardis	
232 Broadway	State	Zip	232 Broadway	State	Zip
Newport 9. NAMES AND ADDRES Director Name	RI SSES OF THE DIR	02840 ECTORS (*x* BOX FOR	Newport ATTACHMENT) FILL IN SPAC Director Name	RI ES BEFORE USING ATI	02840 CACHMENTS
None Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name		• • •	Director Name		
Street Address			Street Address		
Cuy	State	Zip	City	State	Zip
10. SHARES AUTHORIZE AUTHORIZED SHARES	D (*X* BOX FOR AT	FACHMENT)	11. SHARES ISSUED ("X" BOX FOR ATTACHMEN	T)
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
100 COMM NO PAR VAL	ŲĖ				
			65	Common	No Par

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



File Date: 3-8-02

Check No.: 1279

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.

Another Toulouveres

Mint or Dige Name of Officer

Title of Officer



I. Corporate ID No.

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001

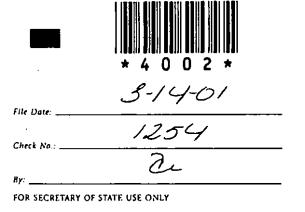
STOP PLEASE READ INSTRUCTIONS

Filing Period: January 1-March 1	•	Filing Fee: \$50.00	
(FORM MIST BE TYPED IN BLACK)			

2. Name of Corporation

4002	Charleo, I	ncorporated			
3. Street Address Principal Business O	Tice		City	State	Zip
232 Broadway 4. Business Phone No.		S. State of incorporation RHODE ISLA		RI	02840 ଜ୍ୟୁଟ୍ଲେଟ
401-848-0878 7. Brief Description of the Character o	f Business Conducted in .	*****	-		_
Real and tangible 8. NAMES AND ADDRESSI President Name	personal press of the Office	operty holdings ERS (*X* BOX FOR ATTA	s and investment (CHMENT) FILL IN SPACES BE Vice President Name	EFORE USING ATTA	CHMENTS
Harry C. Koulouva	rdis		Helen C. Nelson Street Address		
232 Broadway			232 Broadway		
City	State	Zip	City	State	Zip
Newport Secretary Name	RI	02840	Newport Treasurer Name	RI ·	02840
Helen C. Nelson			Harry C. Koulous Street Address	vardis	•
232 Broadway	State	Zip	232 Broadway	State	Zip
Newport 9. NAMES AND ADDRESS! Director Name	RI ES OF THE DIREC	02840 CTORS (*X* BOX FOR AT	Newport TACHMENT) FILL IN SPACES Director Name	RI BEFORE USING ATT	02840 CACHMENTS
None Street Address			None Street Address		
City	State	Zip	City	State	Zip
Director Name	•	•	Director Name		•
None Street Address			None Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED	("X" BOX FOR ATTA	CHMENT)	11. SHARES ISSUED ("X	* BOX FOR ATTACHMEN	77)
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
100 COMM NO PAR 1	ALUE		65	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 contained herein are true and correct.

Statute of Officer

Date

Print or Typp Name of Officer

Till of Officer

Enm K20 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



•	•				
(FORM MUST BE TYPED IN E					
1. Corporate ID No.	2. Name of Corporal	tion			
4002		Incorporated			
3. Street Address Principal Busin			City	State R I	^{ZIp} 02840
232 Broads	way		Newport	κ1	
4. Business Phone No.		5. State of Incorporation	п		6. SIC Code
401-848-0		RHODE ISLAI	ND		5538
7. Brief Description of the Chara					
	_		holdings and in	nvestment	
8. NAMES AND ADDR President Name	ESSES OF THE OFFI	CERS ("X" BOX FOR ATTA	ACHMENT) FILL IN SPACES Vice President Name	BEFORE USING ATTAC	HMENTS
Harry C. Ko	ulouvardis		Helen C.	Nelson	
Street Address			Street Address		
232 Broadwa	y		232 Broad	dway	
City	State	Zip	City	State	Zip
Newport	RI	02840	Newport	RI	02840
Secretary Name		•	Treasurer Name	•	•
Helen C. Ne	1son		. Harry C. Ko	ulouvardis	
Street Address			Street Address		
232 Broadwa	y		232 Broadwa	y	
Clty	State	Zip	City	State	Zip
Newport	RI	02840	Newport	RI	02840
9. NAMES AND ADDR	ESSES OF THE DIRI	ECTORS ("X" BOX FOR A	TTACHMENT) FILL IN SPACE	S BEFORE USING ATTA	ACHMENTS
Director Name			Director Name		
			•		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name		• • • • • •	Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORI	ZED ("X" BOX FOR ATT.	ACHMENT)	11. SHARES ISSUED ('X" BOX FOR ATTACHMENT	r)
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Sertes	Par Value	Number of Shares	Class/Series	Par Value
				Common	Mo Daw
100 SHS NO PAR	COM		65	Common	No Par
			,		

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

	* 4 0 0 2 *	
File Date:	2/3/00	_
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Ву:	Ce	_
FOR SECRETAR	Y 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.

Structure of Officer Date

Harry C. Koulouvardis
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 BLAC	EK)				
I. Corporate ID No. 4002	2. Name of Corporation Charico, incor	porated			•
3. Street Address Principal Business C	Office		City	State	Zip
232 Broadway			Newport	RI	02840
4. Business Phone No.	·	5. State of Incorporation RHODE ISLAND	1		6. SIC Code 5538
401-848-0878 7. Brief Description of the Character	of Business Conducted in Rh	ode Island			
Real and tangi	lble persona	l property ho	oldings and inves	tment	
8. NAMES AND ADDRESS President Name	ES OF THE OFFICE	RS ("X" BOX FOR ATTACH	IMENT) FILL IN SPACES BEF Vice President Name	FORE USING ATTA	CHMENTS
Harry C. Kould	ouvardis		Helen C. Nels	on	
Street Address 232 Broadway			Street Address 232 Broadway	•	
Newport Newport	State RI	02840	Newport Newport	State RI	^{z1} 02840
Secretary Name Helen C. Nelso	on ·	••	Treasurer Name Harry C. Koul	ouvardis	
Street Address			Street Address		
232 Broadway			232 Broadway		
City	State	Zip	City	State	Zip
Newport	RI	02840	Newport	RI	02840
9. NAMES AND ADDRESS Director Name	SES OF THE DIRECT	ORS ("X" BOX FOR ATTA	CHMENT) FILL IN SPACES B Director Name	EFORE USING ATT	TACHMENTS
Street Address			Street Address		
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 ATTACH	MENT)	11. SHARES ISSUED (*X* I	BOX FOR ATTACHMEN	(T)
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
100 SHS NO PAR CO	M		65	Common	No Par

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

	* 4 0 0 2 *
File Date:	Mar 9199
Check No.:	15743
Ву:	J Ø
,	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



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

STOP PULASE READ INSTRUCTIONS

(FORM MUST BE TYPED IN BLACK) 1. Corporate ID No. 2. Name of Corporation 4002 Charleo, Incorporated Zip State 3. Street Address Principal Business Office City 02840 RI Newport 232 Broadway 6. SIC Code 5. State of Incorporation 4. Business Phone No. **RHODE ISLAND** 5538 401-848-0878 7. Brief Description of the Character of Business Conducted in Rhode Island . , Real and tangible personal property holdings and investment 8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) Harry C, Koulouvardis Helen C. Nelson Street Address Street Address 232 Broadway 232 Broadway Zip City State State City 02840 RI 02840 RI Newport Newport Treasurer Name Secretary Name Harry C. Koulouvardis Helen C. Nelson Street Address Street Address 232 Broadway 232 Broadway City City 02840 RI 02840 RI Newport Newport 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) Director Name Director Name Street Address Street Address State Zip City Zip City State Director Name Director Name Street Address Street Address Zip State City State Zip City 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) 10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) ISSUITED SHARES AUTHORIZED SHARES

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

Number of Shares

65

	* 4 0 0 2 *
File Date:	3.16.98
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Ву:	169
COD SECRETA	BY OF STATE USE ONLY

Class/Series

Par Value

Number of Shares

100 SHS NO PAR COM

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.

Signatury of Officer

Date,

Print or Type Name of Officer

Class/Series

Common

Par Value

No Par



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

PROFIT	CORPORATION	ANNUAL	REPORT	1997

PROFIT COR Filing Perlod: Januar			KEPUKI 1997		PLEASE RU INSTRUCTIO BULORE
FORM MUST BE TYPED IN BL 1. Corporate ID No. 4002	ACK) 2. Name of Corpora Charlco, In				COMPLETE THIS LORG
 Street Address Principal Busines 232 Broadway 	s Office		City Newport	State RI	02840
1. Business Phone No. 401-848-0878		5. State of Incorporation RHODE ISLA!	ΔN		6. SIC Code 5538
7. Brief Description of the Charact Real and tand	er of Business Conducted (gible perso)	n Rhode island nal property h	oldings and inve	estment	
B. NAMES AND ADDRE President Name Harry C. Koul		CERS (*x* box for attac	CHMENT) Vice President Name Lola A. Koulo	ouvardis	
Street Address 232 Broadway			Street Address 27 Holten Ave	enue	
Newport	State RI	zıp 02840	chy Newport	State RI	02840
Secretary Name Lola A. Koulo	ouvardis		Treasurer Name Harry C. Kou	louvardis	
Street Address 27 Holten Ave	enue		Street Address 232 Broadway		
City Newport	State RI	21p 02840	Newport	State RI	02840
9. NAMES AND ADDRE Director Name	SSES OF THE DIR	ECTORS (*X* BOX FOR AT	TACHMENT) Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		•
Street Address			Street Address		
City	State	Zip	Clty	State	Zip
10. SHARES AUTHORIZ	LED AND ISSUED	"X" BOX FOR ATTACHMENT.	ISSUED SHARFS		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
100 SHS NO PAR C	COM		65	Common	No Par

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

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File Date:	19197	
Check No.:	1145	
By:	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.

\$ touloward 1.8.9

Harry C. Koulouvardis

Print or Type Name of Officer

President

Title of Officer

PROFIT CORPORATION ANNUAL REPORT

1996



State of Knode 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

		PLEASE TYPE OR			
PORATE IO NO.	2. NAME OF CORPORATIO	н			
4002		lco, Incorporated	1		
EET ADORESS PAINCIPAL BUSINE	SS OFFICE		Tairi	STATE	72° 000€
232 Broady	way		Newport	RI	02840
401-848-01	979	S. STATE OF INCORPORATION			6. SIC 000E
		RHODE IS	SLAND		5538
		sonal property	holdings and		
-	Koulouvardis	• • · · ·	vice president wave Lola A. Kou	· ·· ·· • · •	
232 Broad	way		STREET ADDRESS 27 Holten A	venue	
Newport	STATE	Z# C00€ 0 2 8 4 0	Newport	RI	02840
	oulouvardis		Harry C. Ko	ulouvardis	
TADDRESS	Avenue		232 Broadwa	- .	
Z/ NOICEN					
Newport	STATE RI	72P 000E 02840	Newport	STATE RI	02840
Newport	STATE RI	02840	•	ļ RI	
Newport	STATE RI	02840	Newport LESSES OF THE D DRIECTOR NAME	ļ RI	
Newport TOR HAME -	STATE RI	02840	Newport LESSES OF THE D DRIECTOR NAME STREET ADDRESS	RI	02840
Newport TOR MANE T ADDRESS	STATE RI	02840	Newport LESSES OF THE D DEFECTION NAME STREET ADDRESS	RI	02840
Newport TADORESS	STATE RI	02840	Newport LESSES OF THE D DEFECTOR NAME STREET ADDRESS OTTY J ÖRECTOR NAME	RI	02840
Newport TOR NAME TADORESS TOR NAME	STATE RI	O 2 8 4 O A M E S A N D A D D F ZIP COOE S H A R E S A U T H O F	Newport LESSES OF THE D DORECTOR NAME STREET ADDRESS GTY GTY GTY	I R E C T O R S STATE	02840 — Z₽ coose
Newport TADORESS TOR NAME	STATE RI STATE	O 2 8 4 O A M E S A N D A D D F ZIP COOE S H A R E S A U T H O F	Newport LESSES OF THE D DORECTOR NAME STREET ADDRESS GTY GTY GTY	I RECTORS STATE	02840 — Z₽ coose
Newport TOR HAME T ADDRESS TOR HAME T ADDRESS	STATE RI STATE STATE 1 0 . AUTHORIZED SHARES	O 2 8 4 O A M E S A N D A D D F ZIP COOE S H A R E S A U T H O F	Newport LESSES OF THE D DEFECTION NAME STREET ADDRESS GTY LIZED AND ISSUE	STATE STATE STATE D ISSUED SMARES	22P COO€
Newport TOR NAME ET ADDRESS ET ADDRESS NUMBER OF SHARES	STATE STATE STATE 1 0 . AUTHORIZED SHARES CLASS / SERIES	O 2 8 4 O A M E S A N D A D D F ZIP COOE S H A R E S A U T H O F	Newport LESSES OF THE D DORECTOR NAME STREET ADDRESS OTY DIRECTOR NAME STREET ADDRESS OTY HUVBER OF SHARES	STATE STATE STATE CLASS/SERES	22P COO€

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. File Date: Signature of Officer Check No:

For Secretary of State Use Only

Ву:

Title of Officer

7 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

Please Type or Print File Annually – Jan. 1 - March 1 Filing Fee \$50.00

Make Checks Payable to: Secretary of State

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

0004002			Annual Report for the year:1995			
Corporate ID:	Charles Inc			,		
Name of Corporation:				check one): poration (See RIGL Chapter 7-1. Service Corporation (See RIGL C		
Island (Provide street addre 232 Broad	way RI 02840	in Rhode	Real_and	the character of business conduct _tangible_persona _and_investment_	al_property_	
	THE	NAMES OF THE	C OFFICIENC + DE			
PRESIDENT	ınr	STREET ADDRI	E OFFICERS ARE	CITY/STATE	ZIP CODE	
Harry C. Kou		232 Broad STREET ADDRI	Way_	Newport, RI	02840	
Lola A. Koul		27 Holten	Avenue	Newport, RI	02840 ZIP CODE	
Lola A. Koul	ouvardis	27 Holten STREET ADDRE	Avenue	Newport, RI	02840 ZIP CODE	
Harry C. Kou	·	232 Broad		Newport, RI	02840	
NAME	THE N	STREET ADDRE	DIRECTORS ARI	CITY/STATE	ZIP CODE	
NAME		STREET ADDRE	ESS	CITY/STATE	ZIP CODE	
NAME		STREET ADDRE	SSS	CITY/STATE	ZIP CODE	
NUMBER OF SHARES AU	THORIZED (Rider may be attached)	-	NUMBER OF SHARES	ISSUED AND OUTSTANDING (R	(ider may be attached)	
Number of Shares	Class / Series	1	Number of Shares	Class / Series		
100	Common		65	Common		
Date _ January		Ву:	Toulous	Soulanire d'e		
Form 31 1/95		PRINT OR TYPE TITLE OF OFFIC	MARIE OF OFFICER SIGNING	,		
- · · · · · · · · · · · · · · · · · · ·	DESIGNATED REG		//	OF PROCESS		
DI EACE MOTE, 16 th and	in and a second an	ACT THE PAGEN	LIONSERVICE	OF PROCESS:	<u></u>	

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

STEPHEN A. HAIRE 112 SELLEVUE AVENUE NEWPORT RI 02840 FILED

JAN 4 1995

By OC ck #1083

Filing Fee \$50.00 Payable to: Secretary of State

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: 0004002	Ar	nual Report for th	e vear:	1994	
Name of Business Entity:		Charlco,	Incorporated		.
Business entity organized under the laws of the State of: R1 Federal Taxpayer Identification Number For foreign entity, address and telephone number of principal	- i	[] Profes [] Limite Name, title and in communications a	ess Corporation (See RIGL ssional Service Corporation ed Liability Company (See ailing address of contact pe	(See RIGL Cha RIGL 7-16) rson to whom	pter 7 ₇ 5.1)
Phone: () Address and telephone of the principal office of business enti- Is, and (Provide street address - Not P.O. Box):		Moore, V 112 Bell Newport,	Virgadamo & Ly evue Avenue RI 02840	nch, Ltđ.	
232 Brcadway	 	holdings Date of Organizat	tangible personand investment tion December 23 tion to do business in Rhod	1969	
Phone: 1 1027 0 10 0010				_	
CHIEFERECTIVE OFFICER OF THE STREET OF THE	E NAMES OF THE STREET ADDRESS OF THE STREET	ay Avenue Avenue SS Avenue DIRECTORS ALESS	Newport, R CHYSTATE Newport, R TENAISE Newport, R CHYSTATE Newport, R	<u>I</u>	0 2 8 4 0 72 F COD 20 P COD 20 P COD 20 P COD 20 P COD 21 P COD 21 P COD
NAME	STREET ADDRE	ESS	CHYSTATE		Z:P COL
NUMBER OF SHARES AUTHORIZED (If Applicable) NUMBER 100 CLASS common SERIES PAR VALUE OR WITHOUT PAR no par value February 25 Date	By:	NUMBER 6 CLASS C SERIES PAR VALUE OR WITHOUT PAR HARRY C. H	nc par value		pplicable)
DESIGNATED REGISTS	THE SECRET		 ::	 .	

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

MAR (1991 By 506821

1647 grs.

To be filed annually between January 1st and March 1st

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

Corporate ID	004002	Annual Report for t	he year 1999
First: The name	of the corporation is	Charles, locores	nated
SECOND: It is inco	orporated under the laws of	Rhode Island	
	of business, briefly stated, iss and investment	real and tangible	personal property
FOURTH: If foreig	n corporation, address of its prin	ncipal office	
FIFTH: Business ac	ddress in Rhode Island	MOORE, VIRGADAMO	& LYNCH, LTD.,
112 Bel	levue Avenue, Newport	RI 02840	
SIXTH: Names and Name	d addresses of its directors and o		(Attach rider if necessary) number, street, zip code)
	Director		······
	Director		·····
	Director		
Constantine H. Kou	louvardis President	27 Holten Ave.	lewport, RI 02840
Harry H. Koulouvar	dis Vice Presiden	27 Holten Ave., A	lewport, RI 02840
Lola A. Koulouvard	is Secretary	27 Holten Ave., N	lewport, RI 02840
Constantine H. Kou	louvardisTreasurer	27 Holten Ave	Newport, RI 02840
SEVENTH: Numbe	r of Shares authorized:		Par Value
No. of Shares	Class	Series	or statement that shares are without par value
100	Common	None PAID FEBO419 Series SECY OF S	No Par
Eіднтн: Number	of Shares issued:	CEB 04 19	Par Value or statement that
No. of Shares	Class	Series CECIY OF S	Shares are without par value
65	Common	None	No Par
Dated 1/29	(Na	IARLCO, INCORPORATE	•
	Ву	Constantine 4 K	Oulourander
(Report must be	signed by an officer) Tit	le Masurer	

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

Corporate ID	0004002	W.	Annual Report for the ye	ear1992
First:	The name of the corporation is	110	Charles,Incorpe	rated
Second	: It is incorporated under the	aws ofRho	de Island	
Third:	Character of business, briefly s holdings and invest	·	l and tangible per	sonal property
Fourth	: If foreign corporation, addre	ss of its principa	al office	
Г ІГГН:	Business address in Rhode Isla	nd c/o MOQ	RE, VIRGADAMO & LY	NCH, LTD.,
	112 Bellevue Avenue,	Newport,	RI 02840	
Ѕіхтн:	Names and addresses of its dire	ectors and office	PTS: Address (including numb	(Attach rider if necessary) er, street, zip code)
	D	irector	••••	
	D	irector		
	D	irector		
Cons.tant	ine H. KoulouvardisPr	esident 27	Holten Ave., Newp	ort, RI 02840
HarryH.	KoulouvardisVi	ce President 2.7	'Holten Ave., Newp	ort, RI 02840
	Koulouvardis Se		Holten Ave., Newp	
Constant	ine H. KoulouvardisTi	easurer .2.7	Holten AveNewp	ort, RI 02840
Seventi	H: Number of Shares authorize			Par Value or statement that shares are without
No. of Sh 100			None PAID	par value No Par
			FEB 0 5 1992	•
Еіднтн:	Number of Shares issued:		SEC'Y OF STA	
No. of Sh			Series	shares are without par value
65	Common		None	No Par
Dated	2-1- 19.92		CO. INCORPORATED Corporation) Joulous	rauls
(R	eport must be signed by an officer)	Title	J-P-	

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

Corporate II)	0004002	•••••		Annual F	Report for the	year	1991
First:	The na	ame of the corporatio	n is	••••••	Char.l.co	o,Inconp	orated	
	Chara	incorporated under t acter of business, brief erty holdings	fly stated, is	real	Rhode :	Island	rsonal	······································
Fourth	H: If fo	oreign corporation, ad	ldress of its	principal				
Г ІГТН:		ess address in Rhode l					LYNCH, L	rD.
Sixth:	N	s and addresses of its	Office	nd officers		ddress (including nu		rider if necessary)
			D'					
Constantin	е Н.	Koulouvardis	. President	27 H	OLTEN A	VE., NEWP	ORT, R.I	. 02840
Harry C. K	oulou	vardis	. Vice Presid	27	HOLTEN	AVE.,NEW	PORT,RI	02840
Lola A. Ko	ulouv	ardis		27		AVE.,NEW	PORT,RI	02840
Constantin	е Н.	Koulouvardis	. Secretary . Treasurer		HOLTEN	AVE., NEW	PORT, RI	02840
SEVENT		mber of Shares autho	orized:		Series		or stater shares ar	Value nent that e without value
100		Commor	1		None		No Pa:	r Value
Еіднтн	: Num	ber of Shares issued:				PAID 0 ^y 1891	or stater	Value nent that e without
No. of Si	hares	Class				OF STATE	/ \	value
65		Commor	1		none		No Pa:	r Value
Dated	1-8	19 .	91	C (Name of C		INCORPOR	ATED	
				By	nstant	ine 4 Ka	ouloura.	dis
(R	Report mu	ist be signed by an officer	·)	Title/	Presi de	ine 4 K	••••••	······
1011131 1/03								

State of Rhode Island and Providence Plantations

	Arms ar Gr	CORPORATIO 100 NORTH M PROVIDENCE, RHO	ONS DI ONS DIN ONS NIAN	VISION TREET	1,000			CV
Corporate II	0004002			Annual l	Report fo	r the year .1.	390	
First:	The name of the corporate	oration is	.Chan	nlco,I	ಎಷ್ಟರವಾ	rated	•••••	
SECONE Third:	o: It is incorporated un	nder the laws of	r	hode Is	tangi	ble per	sonal	
	property hold	ings and inves	stme	nt			•••••	
Fourth	If foreign corporation	on, address of its prir	ncipal	office		•••••••••••••••••••••••••••••••••••••••	• • • • • • • • • • • • • • • • • • • •	•••••••••••
Г І ГТ Н:	Business address in RI 112 Bellevue A					MO & LYN	CH, LTI),
Sixth:	Names and addresses	of its directors and o	officer		ddress (includ	(ling number, street		if necessary)
••••••		Director			•••••	•••••	• • • • • • • • • • • • • • • • • • • •	***************************************
		Director	•••••			····		***************************************
		Director					· · · · · · · · · · · · · · · · · · ·	
Constantine 1	H. Koulouvardis	President	27	Holten	Ave.,	Newport	. R.I.	02840
Harry C. Kou	louvardis	Vice Presiden	27			Newport		02840
Lola A. Koulo	ouvardi s	Secretary		Holten	Ave.,	Newport	, R.I.	02840
Constantine I	H. Koulouvardis		27	Holten	Ave.,	Newport	, R.I.	0.2.8.4.0
Sevent	н: Number of Shares	authorized:					Par Value	
No. of Si	hares	Class		Series			or statement th hares are with par value	
100	Co	ommon		None		No	Par Va	lue
Еіднтн	Number of Shares is	ssued:				,	Par Value or statement th hares are with	Turt .
No. of SI	hares	Class		Series			par value	, = .
65		ommon		None	, n ,	AID	Par Va	lue
Dated		(Ni (Ni	ame of C	Corporation)	INCORI TEC Ine H	PORATEDA Koulour	ndes	
		Бу	·	P A			• • • • • • • • • • • • • • • • • • • •	•••••••••••

(Report must be signed by an officer)

State of Rhode Island and Providence Plantations CORPORATIONS DIVISION

	0004002		TH MAIN STREET RHODE ISLAND 02903	1989
Corporate ID		•••••	Annual Report for the	year
First:	The name of the corporat	tion is	Charleo, Incorporat	<u>∌</u> d
Second	: It is incorporated unde	r the laws of	Rhode Island	
Third:	Character of business, br	riefly stated, is	real and tangible pe	rsonal
	property holding		estment	
Fourth	: If foreign corporation,	address of its	principal office	
	Business address in Rhod		/o MOORE, VIRGADAMO &	LYNCH, LTD.
SIXTH:	Names and addresses of i	its directors an	nd officers: Address (including nun	(Attach rider if necessary)
******************		Director		
		Director		
	H. Koulouvardis	President	27 Holten Ave., Newpo	rt, R.I. 02840
Harry C. Ko	••••••		dent 27 Holten Ave., Newp	•
Lola A. Kou	•••••••••••••••••••••••••••••••••••••••		27 Holten Ave., Newp	
		Secretary		······································
Constantine	H. Koulouvardis	Treasurer	27 Holten Ave., Newp	ort, R.I. 02840
Seventi	H: Number of Shares aut	thorized:		Par Value or statement that
No. of St	nares Cla	.55	Senes	shares are without par value
100	Commo	on	None	No Par Value
Еіднтн:	Number of Shares issue	ed:	المالمان	Par Value or statement that
No. of St	hares Cla	ss	Series [] 27 1989	shares are without par value
65	Commo	on	None THOSE STATE	. No Par Value
Dated	2/22 1º	9 89	CHARLCO, INCORPORATE (Name of Corporation)	••••••
			By Constantine H. Title Palsidant	Koulouvards
(R	enort must be signed by an off	icer)	Title Polsidant	

Filing fee: \$15.00 .

To be filed annually between January list and March 1st

State of Rhode Island and Providence Plantations Office of the secretary of state

Corporate ID # 4002

Annual Report for the year 1988

FIRST: The name of the corporation is Charlco, Incorporated

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is real and tangible personal property holdings and investment

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island (blank reports will be mailed to this address) c/o MOORE, VIRGADAMO & LYNCH, LTD. 112 Bellevue Ave., Newport, R.I.

SIXTH: Names and addresses of its directors and officers:

(Addresses must include street and number, if any)

Name

Office

Address

Director

PAID

02840

Director

MAR 10 1488.

Director

SECY, OF STATE

Constantine H. Koulouvardipresident

27 Holten Ave., Newport, R.I. 02840

Harry C. Koulouvardis Lola A. Koulouvardis Vice President 27 Holten Ave., Newport, R.I. 02840 27 Holten Ave., Newport, R.I. 02840

Secretary

Constantine H. Koulouvardis

.s . Treasurer 27 Holton Ave., Newport, R.I. 02840

(If additional space is needed, attach rider)

SEVENTH: Number of Shares authorized:

Series

Par Value or statement that shares are without per value

100

No. of Shares

Common

Class

None

No Par Value

EIGHTH: Number of Shares issued:

No. of Shares

Clars

Series

Pur Value or statement that shares are without pur value

65

Common

None

No Par Value

Dated: February

1988

CHARLCO, INCORPORATED

(Name of Corporation)

2

By Constanting H. Kaulouvander

Title Resident

(Report must be signed by an officer)

If the corporation has changed its registered office and/or its registered agent, Form #9 must be filed. Please contact Corporation Division for information, 277-3040

State of Rhode Island and Providence Plantations CORPORATIONS DIVISION 270 WESTMINSTER MALL PROVIDENCE, RHODE ISLAND 02903

Corporate ID. 4002		Annual Report for	the year 1987
FIRST: The name of th	e corporation isCha	rlco, Incorporated	
Second: It is incorpor	rated under the laws of	Rhode Island	
THIRD: Character of be holdings and in		real and tangibl	e personal property
FOURTH: If foreign cor	rporation, address of its	principal office	· ·····
	s in Rhode Islandve., Newport, R.		o & Lynch, Ltd.,
SIXTH: Names and add	dresses of its directors an		(Attach rider if necessary) ng number, street, zip code)
	Director		······································
	Director		······································
•••••••••••••••••••••••••••••••••••••••			•••••••••••••••••••••••••••••••••••••••
Constantine H. Kould	ouvardis President	27 Holten Ave.,	Newport, R.I. 02840
Harry C. Koulouvard	is Vice President	dent 27 Holten Ave.,	Newport, R.I. 02840
Lola A. Koulouvardi:	Secretary	27 Holten Ave.,	Newport, R.I. 02840
Constantine H. Kould	ouvardis Treasurer	27 Holten Ave	Newport, R.I. 02840
SEVENTH: Number of S	Shares authorized:	Series	Par Value or statement that shares are without par value
100	Common	None	No Par Value
	P	AID	
Еібнтн: Number of Sh	nares issued: FB	26 1987	Par Value or statement that
No. of Shares	Class SEC'Y	OF STATE Series	shares are without par value
65	Common	None	No. Mar Value
Dated January 3) 19 ⁸⁷	CHARLCO, INCORPORA	TED
		(Name of Corporation) By Constanting 7	4. Koulawasch
(Report must be signed	d by an officer)	Title PRESIDENT	-

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

Corporate ID 4002	•••••••••••••	• • • • • •	Annual Report	for the year	1986
FIRST: The name	of the corporation is	Charlo	co, Incorporated		
	orporated under the law of business, briefly sta				property
FOURTH: If foreig	n corporation, address	of its princ	cipal office	•••••••••••	
	ddress in Rhode Island e Avenue, Newpo	l		MO & LYNCH,	LTD.
SIXTH: Names an	d addresses of its direc	tors and of		(A cluding number, street, z	ttach rider if necessary) ip code)
	Dire				
Constantine H. K	oulouvardis _	ector sident	27 Holten Ave.	, Newport,	
Harry C. Koulouv	ardis Vice rdis	e President retary	27 Holten Ave. 27 Holten Ave.		
Constantine H. K		-	27 Holten Ave.	, Newport,	R.I. 02840
SEVENTH: Number	er of Shares authorized	02/10/86	Series		Par Value statement that res are without par value
100	Common	987(No I	Par Value
EIGHTH: Number	of Shares issued:	FAID	Series		Par Value statement that res are without par value
65	Common	ANRE CHEK 0033A001		No Pa	ar Value
Dated 1-20-	.1 82	. A ≒ (Nar	Charleo, In ne of Corporation) Constantine	**********	di
Form 31 1/85	e signed by an officer)	1 1(1)	U	***************************************	•••••••••••••••

State of Rhode Island and Providence Plantations CORPORATIONS DIVISION 270 WESTMINSTER MALL PROVIDENCE, RHODE ISLAND 02903

ornorate ID 4002			rear 1985
First: The name	of the corporation is Charle	co, Incorporated	
SECOND: It is inc	corporated under the laws of	Phode Island	
THIRD: Characte	r of business, briefly stated, is	real and tangible pe	rsonal property
noldingsandin	vestment.		
FOURTH: If foreign	gn corporation, address of its pr	rincipal office	
FIFTH: Business	address in Rhode Island	Moore, Virgadamo & I	Lynch, Ltd., 112
Bellevue. Avenue	eNewportRhodeIsl	land 02840	
	nd addresses of its directors and	i officers:	(Attach rider if necessary) imber, street, zip code)
	Director		
	Director		
	Director		•••••••••••••••••••••••••••••••••••••••
.ConstantineH.	KoulouvardisPresident		Newport, RI
.HarryCKoulc	ouvardisVice Presid	dent .27HoltenAvenue	Newport, RI
	wardisSecretary	.27HoltenAvenue	Newport, RI
	KoulouvardisTreasurer	.27Holten.Avenue,	.Newport. RI
	iber of Shares authorized:		Par Value or statement that shares are without
No. of Shares	Class	Series	par value
100	Common		No Par Value
Eighth: Numb	per of Shares issued:		Par Value or statement that shares are without
No. of Shares	Class	Series	par value
63	Common		No Par Value
Dated February	1985	Charleo, Incorporation)	
_		By Constantine H.	taulomards
	IVED MAIN 1985 st be signed by an officer)	(Name of Corporation) By Constantine #. Title Presi dent	

To be filed annually between January 1st and March 1st

Annual Report for the year1984

State of Rhode Island and Providence Plantations Office of the secretary of state

First: The nam			
SECOND: It is in	ncorporated under the	laws of Rhode	Island
THIRD: Charact	er of business, briefly	stated, is real	and tangible persona
property holdin	gs.andinvestment	•	
Fourth: If for	eign corporation, add	lress of its princip	oal office
FIFTH: Busines	s address in Rhode Is	land	
	Virgadamo & Lyr Rhode Island 0284 and addresses of its		Bellevue-Avenue
	ses must include street an	1	
Name	Office		Address
	Director		
	Director	44	
	Director	***************************************	***************************************
intine H. Koulou		27HoltenA	venue, Newport, RI
ntine H. Koulou	vardis President		venue, Newport, RI.
ntine H. Koulou	vardis. President s Vice Presid	ent27Holten	Avenue, Newport, RI
ntine H. Koulou C. Koulouvardi La A. Koulouvard	vardis. President s Vice Presid is Secretary avardis. Treasurer	ent .27Holten 27Holten	_
ntine H. Koulou C. Koulouvardi La A. Koulouvard antine H. Koulou (If additional space is n	vardis. President s Vice Presid is Secretary avardis. Treasurer	ent .27Holten 27Holten 27.Holten	Avenue, Newport, RI. Avenue, Newport, RI Avenue, Newport, RI
ntine H. Koulou C. Koulouvardi La A. Koulouvard antine H. Koulou (If additional space is n	vardis. President s	ent .27Holten 27Holten 27.Holten	Avenue, Newport, RI Avenue, Newport, RI Avenue, Newport, RI
ntine H. Koulou C. Koulouvardi La A. Koulouvard antine H. Koulou (If additional apace is n SEVENTH: Num	vardis. President s	ent 27 Holten 27 Holten 27 Holten 27 Holten 27 Holten	Avenue, Newport, RI Avenue, Newport, RI Avenue, Newport, RI Par Value or statement that shares are without
Intine H. Koulou C. Koulouvardi La A. Koulouvardi antine H. Koulou (If additional space is n SEVENTH: Num No. of Shares !100	vardis President s Vice President Secretary avardis Treasurer eeded, attach ider) ber of Shares author Class	ent 27 Holten 27 Holten 27 Holten 27 Holten 27 Holten	Avenue, Newport, RI. Avenue, Newport, RI Avenue, Newport, RI Par Value or statement that shares are without par value No Par Value Par Value
Intine H. Koulou C. Koulouvardi La A. Koulouvardi antine H. Koulou (If additional space is n SEVENTH: Num No. of Shares !100	vardis. President Summer Vice President Secretary Evardis. Treasurer eeded, attach rider) Class Common	ent 27 Holten 27 Holten 27 Holten 27 Holten 27 Holten	Avenue, Newport, RI. Avenue, Newport, RI. Avenue, Newport, RI. Par Value or statement that shares are without par value No Par Value
ntine H. Koulou C. Koulouvardi La A. Koulouvardi antine H. Koulou (If additional apace is n SEVENTH: Num No. of Shares !100 EIGHTH: Numb	vardis. President Summardis. Vice President Secretary Evardis. Treasurer eeded, attach rider) ber of Shares author Class Common	ent 27 Holten 27	Avenue, Newport, RI. Avenue, Newport, RI Avenue, Newport, RI Par Value or statement that shares are without par value No Par Value Par Value or statement that shares are without
Intine H. Koulou C. Koulouvardi La A. Koulouvardi antine H. Koulou (If additional space is n SEVENTH: Num No. of Shares !100 EIGHTH: Numb	vardis. President s	27 Holten 27 Holten 27 Holten 27 Holten Series Charlco.	Avenue, Newport, RI. Avenue, Newport, RI Par Value or statement that shares are without par value Par Value or statement that shares are without par value 3 No Par Value 61 Incorporated
Intine H. Koulou C. Koulouvardi La A. Koulouvardi antine H. Koulou (If additional space is n SEVENTH: Num No. of Shares !100 EIGHTH: Numb No. of Shares 63 ated: February	vardis President Summor Vice President Secretary avardis Treasurer eeded, attach rider) aber of Shares author Class Common eer of Shares issued: Class Common	27 Holten 27 Holten 27 Holten 28 Holten 28 Holten 28 Holten 29 Holten 20 Hol	Avenue, Newport, RI Avenue, Newport, RI Par Value or statement that shares are without par value No Par Value Par Value or statement that shares are without par value 3 No Par Value 61 Incorporated stion)
Intine H. Koulou C. Koulouvardi La A. Koulouvardi antine H. Koulou (If additional space is n SEVENTH: Num No. of Shares !100 EIGHTH: Numb No. of Shares 63 ated: February	Vardis President S Vice President Secretary Evardie Treasurer eeded, attach rider) ber of Shares author Class Common Class Common 19.84	27 Holten 27 Holten 27 Holten 28 Holten 28 Holten 28 Holten 28 Holten 29 Holten 20 Hol	Avenue, Newport, RI Avenue, Newport, RI Par Value or statement that shares are without par value No Par Value restatement that shares are without par value 3 No Par Value 1 Incorporated stion)

If the corporation has changed its registered office and/or its registered agent, Form #9 must be filed. Please contact Corporation Division for information. 277-3040

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations OFFICE OF THE SECRETARY OF STATE

		Annual Report for the ye	ar 1983
First: The	name of the corporation	is Charleo, Incorpor	ated
SECOND: It	is incorporated under the	he laws of Rhode Isla	nd
THIRD: Cha	racter of business, briefl	y stated, is real and t	angible persona
_property_hold	ings and investment	L.a	
Fourth: If	foreign corporation, a	ddress of its principal offic	ce
Fifth: Bus	iness address in Rhode	Island (blank reports wi	ll be mailed to this
address) c/o Moo New Sixtii: Nan	re, Virgadamo & Lyr port, Rhode Island, nes and addresses of its	nch, Ltd. 112 Bellev , 02840 directors and officers:	uc Avenue,
(Ac	ddresses must include street	and number, if any)	
Namo	Office	Add	ress
•	Director		,
	Director		
	Director	27-Holten-Avenue	
Constantine H.	Koulouvardips _{resident}	19 Pell Street 27 Holten Avenue	
Harry C. Koulou	vardis Vice Presi	ident 10 poll Street 27 Holten Avenue	
Lola A. Koulouv		19 Poll Street,	
	Koulouvard Preasurer is needed, attach ridor)	27 Holten Avenue 19 Pell Street,	Newport, RI
Seventh:	Number of Shares auth	orized:	Par Value or statement that
No. of Shares	Class	Series	shares are without par value
100	Common	· ·	No Par Value
EIGHTH: N	umber of Shares issued	: Series	Par Value or statement that shares are without par value
63	Common	2	No Par Value
Dated: February	/5 1983	Charleo, Incor	porațed
	FEB 221983	By Constantine H.	toulowares
	2 % 1383	Title President	
	bx.	(Report must be signe	ed by an officer)

If the corporation has changed its registered office and/or its registered agent, Form #9 must be filed. Please contact Corporation Division for information. 277-3040

State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

		A	innual Report fo	r the year 1982	٠
First:	The name of	the corporation is	Charle	o, Incorpora	ted
SECOND:	It is incorpo	orated under the l	aws of Rhode	Island	
THIRD:	Character of	business, briefly s	stated, is rea	l and tangib	le perso
		l investment	·		
Fourth:	If foreign (corporation, addr			
	•				
	Desciones add		land Chlante was		
		ress in Rhode Is	•		
Sixtii:	Newport, I	gadamo & Lync Rhode Island, addresses of its d	02840		enue _{z .} .
	(Addresses	must include street and	d number, if any)		
:	Name	Office		Address	
		Director			
		Director		······	
		Director			
nstantine H.	Koulouvard	lis President	19 Pell St	reet, Newpor	t, RI
la A. Koulou	vardis	Vice Preside	ent 19 Pell St	reet, Newpor	t, RI
la A. Koulou	vardis	. Secretary	19 Pell St	reet, Newpor	t, RI
nstantime H. (If additional spa	Koulouvard	dis Treasurer	19 Pell St	reet, Newpor	t, RI
Seventh	: Number o	f Shares authori	zed:	Par V	
No. of Sha	res	Class	Series	or staten shares are par v	without
100		Common		No Par	Value
D		a		D., V	
EIGHTH:		Shares issued:	Service	Par V or statem shares an	ent that
No. of Sha	res	Class	Series	par v	alue
50		Common		No Par	Value
Dated: Jan	uary /d,	19	(Name of Corporation		
			By Constanting	∾ •	elis
		ָר ר	Title Press dep	Z - C	
		L	(Report must	be signed by an o	fficer)
		changed its regis		r is co gistered ag	
Form #9	must be filed.	Please contact Corp	poration Division fo	r i 🚱 📻 ation. 277-	3040

JAN 16 1982

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To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT

OF

CHARLCO, INCORPORATED

Pursuant	t to the provi	sions of Sect	ion 7.1.	1-118 of	the	General	Laws,	1956,	as
amended, the	undersigned	corporation	hereby	submits	the	following	annua	l repo	rt:

FIRST: The name of the corporation is Charlco, Incorporated

SECOND: It is incorporated under the laws of the State of Rhode Island

THIRD: The address of its registered office in Rhode Island is 112 Bellevue Avenue, Newport, Rhode Island 02840

and the name of its registered agent in Rhode Island at such address is Salvatore L. Virgadamo

FOURTH: If a foreign corporation, the address of its principal office in the state or country under the laws of which it is incorporated is

FIFTH: The character of the business in which it is actually engaged in Rhode Island, briefly stated, is real and tangible personal property holdings and investment

SIXTH: The names and respective addresses of its directors and officers are:

Name
Office
Director
Director
Director
Director
Director
Director
Director
Constantine H. Koulouvardis President
19 Pell Street,

Constantine H. Koulouvardis President 19 Pell Street, Newport, R.I.

Lola A. Koulouvardis Vice President 19 Pell Street, Newport, R.I.

Lola A. Koulouvardis Secretary 19 Pell Street, Newport, R.I.

Constantine H. Koulouvardis Treasurer 19 Pell Street, Newport, R.I.

SEVENTH: The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	Series	or Statement that Shares are without Par Value
100	Common	-	No Par-Value

9572A14 ... 15.00

Par Value per Share

Ferm 31 11-80

EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	Series	Par Value per Share or Statement that Shares are without Par Value
50	Common	-	No Par Value

Dated February , 19 81

CHARLCO, INCORPORATED
(NAME OF CORPORATION)

By Constantine H Houlowards

To be filed annually between January 1st and March 1st

State of Khode Island and Providence Plantations OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT

0F

	CHARALDO, INC	•	
amended, the undersign	ed corporation hereb	y submits the	General Laws, 1956, as following annual report:
SECOND: It is inc	orporated under the	laws of Rho	de Island
THIRD: The addre	ss of its registered offic	ce in Rhode Isla	nd is
	-		
	tered agent in Rhode I	Island at such a	ddress is
		ed is	ncipal office in the state or
FIFTH: The chara Island, briefly stated, is	cter of the business i	n which it is a aurant busin	ctually engaged in Rhode
Name Charles H. Gavitt	s and respective addres		Address
	Director		e Ave., Westerly, R. I.
Dorothy J. Gavitt			eas above
	Director Director		
	Director		······································
	Director		
Charles H. Gavitt	President		e as above
Dorothy J. Gavitt			e as above
Dorothy J. Gavitt	Secretary	Sam	e as above
Charles H. Gavitt	Treasurer		e as above
SEVENTH: The agg by classes, par value of sh	regate number of share ares, shares without p	es which it has a arvalue,andseri	outhority to issue, itemized ies,ifany, within a class, is:
Number of Shares	Class	Series	Par Value per Share or Statement that Shares are without Par Value
600		co	mmor without par value

APR 15 1980

Eighth: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

_	Number of Shares	Class		Series	Par Valu or State Shares a Par	e per St ement the re with Value	nare hat out
300				common	without	par	value
					<i>i</i> •		
					•	-	
						!	
Dated	: Jan29	, 19 80 .	CHARALDO	INC	DRATION)		· ·· · · · · · · · · · · · · · · · · ·
		Ву	(-Karl	er of Janes	Il Tuas		

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT

 \mathbf{or}

	CHARLCO, INC	ORPORATED	
amended, the undersigned First: The name of	l corporation hereby the corporation is	y submits the follo CHARLCO, INCO	neral Laws, 1956, as owing annual report: RPORATED
			ISLAND
94 William St and the name of its register	reet, Newport, red agent in Rhode I	Rhode Island sland sland at such addre	
country under the laws of w	- ·	ed is	oal office in the state or
Island, briefly stated, isand investment	real and tangib	le personal pr	
SIXTH: The names a			and officers are:
	Director		
Constantine H. Koulous			eet, Newport, R. I.
Lola A. Koulouvardis			eet, Newport, R. I.
Lola A. Koulouvardis	Secretary		eet, Newport, R. I.
Constantine H. Koulou	vardisTreasurer	19 Pell Str	eet, Newport, R. I.
SEVENTH: The aggre by classes, par value of shar	egate number of share res, shares without p	es which it has auth arvalue,andseries,i	ority to issue, itemized fany,withinaclass,is:
Number of Shares	Class	2 Series	Par Value per Share or Statement that Shares are without Par Value
100	Common	_ c3	Without par value
		2610	
		00 ************************************	
Form 31 8-79		• 15.0 • 15.0	FEB 25 1980

 $\label{eq:Eighth:} \textbf{Eighth:} \quad \textbf{The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:$

Number of Shares	Claus	Series	Par Value per Share or Statement that Shares are without Par Value
50	Common	-	Without par value

Dated February , 19 80 CHARLO, INCORPORATED (NAME OF CORPORATION) By Comtantine H. Kauloumds

Its Besident

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT

OF

		O.			
	СН	ARLCO,	INCORPORA	TED	
Pursuant to the provi amended, the undersigned FIRST: The name of the	corporation	hereby	submits the	followii	ng annual report:
	,				
SECOND: It is incorpo	orated unde	er the la	ws of RHC	DE ISL	CUA
THIRD: The address of 94 William Street, No.	•				
and the name of its registere Constantine H. Koulou					8
FOURTH: If a foreign	corporatio	n, the ad	dress of its p	rincipal c	office in the state or
country under the laws of wh					
			.,,.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
FIFTH: The character	r of the hu	siness in	which it is	actually	engaged in Rhode
Island, briefly stated, is re-					•
and investment					
1					
Sixth: The names an		e address Office	es of its dire		officers are: Address
NONE	Direct				
	Di				
	Direct				
: .	Direct	or			
	Direct	or			
	Direct	or			
Constantine H. Koulou	vardis Presid	lent	19 Pell :	Street,	Newport, R.I.
Lola A. Koulouvardis			19 Pell	Street,	Newport, R.I.
Lola A. Koulouvardis	Secret	ary	19 Pell	Street,	Newport, R.I.
Constantine H. Koulou	vardis Treas	urer	19 Pell	Street,	Newport, R.I.
SEVENTH: The aggreg by classes, par value of share					
I					Par Value per Share or Statement that
Number of Shares	Class	# 2	Series		Shares are without Par Value
100		?S 79			wh car value
100	Common	19	-	WICHC	ut par value
		469			APR 25 1979
		·+09		-	-12Ko
		1 4			, -70
		: :			
		• •			
Form 31 2CM 11-78		1 5. 15.			

Eighth: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	Series	or Statement that Shares are without Par Value		
50	Common	-	without par value		

Dated February , 19 79 CHARLCO, INCORPORATED (NAME OF CORPORATION)

By Constantine H. Koulouvardes

State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT

OF

	Or					
CH	ARLCO, INCORPO	RATED	ı	,		
Pursuant to the provisio amended, the undersigned cor First: The name of the	poration hereby s	ıbmits	the i	Collowing	annual rep	
SECOND: It is incorpora	ited under the law	s of R	HODE	ISLAND		
THIRD: The address of	its registered office	e in Rh	node I	sland is		
94 William Street, No						
and the name of its registered	agent in Rhode Isl	and at	such	address i	S	
Constantine H. Koulouva	rdis					
FOURTH: If a foreign c country under the laws of whi Fifth: The character island, briefly stated, is real and investment SIXTH: The names and i	of the business in and tangible	ed is	ch it i	is actuall	y engaged ty holdir	in Rhode
Nanio	Office			Ad	dress	
NONE	Director	-				e e
	Director					
•	Director					
	Director					
	Director Director			•	•	
Constantine H. Koulouvardis	President	10 p.	011	Stroot	Newport,	р т
Lola A. Koulouvardis	Vice President				_	
Lola A. Koulouvardis	Secretary				Newport,	
Constantine H. Koulouvardis	Treasurer				Newport,	
SEVENTH: The aggrega	te number of share	es which	ch it l	nas author	rity to issue	e, itemized

by classes, par value of shares, shares without partvalue, and series, if any, within a class, is:

Number of Shares	Class	78 <u>Series</u>	or Statement that Shures are without Par Vulue
100	Common	15.00 2684A1415.00BL	without par value AUG 28 1978
Foreign the State of the State			

EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	Series	or Statement that Shares are without Par Value
50	Common	-	without par value

Dated March 20, ,1978.

CHARLCO, INCORPORATED (NAME OF CORPORATION)

By Constanting + Kondonvarchis

Its President

To be filed annually between January 1st and March 1st

State of Chode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT

 OF

Or	
CHARLCO., INCORPORATED	
Pursuant to the provisions of Section 7.1.1-118 of the G amended, the undersigned corporation hereby submits the follow	ing annual report:
FIRST: The name of the corporation is CHARLCO, INCO	DRPORATED
SECOND: It is incorporated under the laws of RHODE ISI	AND
THIRD: The address of its registered office in Rhode Island	
94 William Street, Newport, R. I.	$(x_1, x_2, \dots, x_n) \in \mathbb{R}^n$
and the name of its registered agent in Rhode Island at such addre	ess is
Constantine H. Koulouvardis.	
FOURTH: If a foreign corporation, the address of its princ country under the laws of which it is incorporated is	
the state of the s	
FIFTH: The character of the business in which it is acti	
Island, briefly stated, is real and tangible personal page	toberth votainds
and investment	
Sixth: The names and respective addresses of its directors at	nd officers are:

None Director
Director
Director
Director

Director Director

Constanting H. Koulouvardis President 19 Pell Street, Newport, R. I.
Lola A. Koulouvardis Vice President 19 Pell Street, Newport, R. I.
Lola A. Koulouvardis Secretary 19 Pell Street, Newport, R. I.
Constanting H. Koulouvardis Treasurer 19 Pell Street, Newport, R. I.

SEVENTH: The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares Class Series Par Value per Share or Statement that Shares are without Par Value

100 Common - Without par value

MAR 4 1977

FORM 31 JSM 9-76

Eighth: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

À

Number of Shares	Class	Series	Par Value per Share or Statement that Shares are without Par Value
50	Common	-	Without par value

Dated February 28 , 19 77 CHARLCO, INCORPORATED

By Constantine H. Koulewards

Its President

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT

OF

	U	T	
	CHARLCO, INCOR	PORATED	
amended, the undersigned	corporation hereb	y submits the follow	General Laws, 1956, as ring annual report: RPORATED
· community of the comm		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
. SECOND: It is incor	porated under the l	aws of RHODE I	SLAND
THIRD: The address 94 William Stre		hodo Icland	is
and the name of its registe $\mathcal{C}_{\text{onstantine H}}$.			ess is
FOURTH: If a foreign country under the laws of	which it is incorpo	rated is	ipal office in the state or
Island, briefly stated, is and investment.	real and tang	ible personal p	
SIXTH: The names a	nd respective addr	esses of its directors	and officers are:
NONE	Director		
NONE	Director	2 1 November 10 1 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
NONE			
**	Director		
NONE	Director		
NONE		., ,, ., ., ., ., ., ., ., ., ., ., ., .	
Constantine H.Koulouvardis		19 Pell Street	Newport, Rhode Island
Lola A. Koulouvardis	Vice Preside	nt 19 Pell Stre	eet, <u>Newp</u> ort, Rhode Island
Lola A. Koulouvardis	Secretary	19 Pell Stre	et, Newport, Rhode Island
Constantine H.Koulouvardis	Treasurer	19 Pell Stre	et, Newport, Rhode Islan
SEVENTH: The aggr by classes, par value of shar			thority to issue, itemized , if any, within a class, is :
			Par Value per Share or Statement that
Number of Shares	Cla <u>ss</u>	Series	Shares are without Par Value
100	Common	-	without par value
		MAR1	ס לפר ס

MAR 1 0 1976

FORM 31 35M 10-75

EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	Series	or Statement that Shares are without Par Value
50	Common	_	without par value

Dated Much & , 1976 CHARLCO, INCORPORATED (NAME OF CORPORATION)

By Constatus H. Konlowards

Its President

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT

OF

		CHARLCO, I	NCORPORATED	
	amended, the undersigne	d corporation hereb	7-1.1-118 of the Ge by submits the following CHARLCO, INCOM	
	SECOND: It is income	rporated under the	laws of RHODE ISLA	AND
	THIRD: The address	ss of its registered o	office in Rhode Island is port, Rhode Island	9
•				
•	and the name of its regist			
	Constanti			
	country under the laws of		orated is	oal office in the state or
				ally engaged in Rhode
	Island, briefly stated, is			
	and investment.		amamingor dondir Res	pport inording
			and the second of the second o	
	SIXTH: The names		resses of its directors a	•
	None	•		audi ess
		Director		
	n			
		Director		
		Director Director		
	· · · · · · · · · · · · · · · · · · ·	Director Director		
Cons		Director Director Director Director		
	" " tantine H. Koulouvar	Director Director Director Director	19 Pell Street.	Newport, Rhode Island
Lola	" " tantine H. Koulouvar	Director Director Director Director Vice President	19 Pell Street. ent19 Pell Street.	Newport, Rhode Island Newport, Rhode Island
Lola Lola	" " tantine H. Koulouvar A. Koulouvardis	Director Director Director Director President Vice Preside Secretary	19 Pell Street, ent19 Pell Street, 19 Pell Street,	Newport, Rhode Island
Lola Lola	" tantine H. Koulouvar A. Koulouvardis A. Koulouvardis tantine H. Koulouvar	Director Director Director Director President Vice Preside Secretary Treasurer Director Office Offic	19 Pell Street, ent19 Pell Street, 19 Pell Street, 19 Pell Street,	Newport, Rhode Island, Newport, Rhode Island, Newport, Rhode Island, Newport, Rhode Island
Lola Lola	" " " " A. Koulouvardis A. Koulouvardis tantine H. Koulouvar	Director Director Director Director President Vice Preside Secretary Treasurer Director Office Offic	19 Pell Street, ent19 Pell Street, 19 Pell Street, 19 Pell Street,	Newport, Rhode Island, Newport, Rhode Island, Newport, Rhode Island, Newport, Rhode Island

EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Par Value per Share or Statement that Shares are without Par Value Number of Shares Class Series without par value 50 Common

Dated 2 - 8 - 19.75

CHARLCO, INCORPORATED (NAME OF CORPORATION)

president

11 Construction of Konformerch

1AY -1-75 SEC- OF 163 AR*** 15.00

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT

 \mathbf{OF}

	CHARLCO, INCORPORATED
amended, the undersigned co	ions of Section 7-1.1-118 of the General Laws, 1956, as proporation hereby submits the following annual report: the corporation is Charleo, Incorporated
SECOND: It is incorpor	rated under the laws of Rhode Island
THIRD: The address of	f its registered office in Rhode Island is
	Street; Newbort, Rhode Island
and the name of its registered	d agent in Rhode Island at such address is ne H. Koulouvardis
_	corporation, the address of its principal office in the state or nich it is incorporated is
•	-
FIFTH: The character	r of the business in which it is actually engaged in Rhode
Island, briefly stated, is	real and tangible personal property holding and
investment.	
	and the second s
SIXTH: The names and	respective addresses of its directors and officers are:
NONE	Director
()	Director
	Director
	Director
Constantine H. Koulouva	
Lola A. Koulouvardis	Vice President 19 Pell Street; Newport, Rhode Island
Lola A. Koulouvardis	Secretary 19 Pell Street; Newport, Rhode Island
Constantine H. Koulouva	rdi¶reasurer 19. Pell Street; Newport, Rhode Island
CENTRY The aggrega	ato number of charge which it has guthority to issue itemized

SEVENTH: The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Par Value per Share

Number of Shares	Class	Series	or Statement that Shares are without Par Value
100	common	-	without par value

JAN 25 1074

FORM 31 35M 8-73

EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	Series	or Statement that Shares are without Par Value
50	common	-	without par value.

Dated /- 23 - , 1974

CHARLCO, INCORPORATED

(NAME OF CORPORATION)

.. Presiden

FEB -8-74 STATE 7850 A8++++15.00

FORM 31 80M 8-72

To be filed annually between January 1st and March 1st

State of Chode Island and Providence Plantations OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT

OF

***************************************	Charlco, 1	Incorporated	
Pursuant to the provision amended, the undersigned cor	poration hereby	y submits the follow	ing annual report:
FIRST: The name of the	e corporation is.	Charleo, Incor	porated
SECOND: It is incorpora	ted under the la	aws of Rhode Is	land
THED: The address of Constantine	•		is
and the name of its registered	agent in Rhode	Island at such addr	ess is
FOURTH: If a foreign country under the laws of whi	orporation, the a	address of its princip	
FIFTH: The character of	the business in v	vhich it is actually en	
briefly stated, is real and	l tangible p	ersonal property	holding and
investme	en t		
SIXTH: The names and	respective addr		and officers are:
	Director		
	Director		
	Director		
, .,	Director		
	Director		
	Director		,
Constantine H. Koulouvardis	President	19 Pell Street, N	ewport, Rhode Island
Lola A. Koulouvardis			
Lola A. Koulouvardis	Secretary	19 Pell Street, N	lewport, Rhode Island
Constantine H. Koulouvardis		19 Pell Street, N	lewport, Rhode Island
SEVENTH: The aggregate by classes, par value of shares, s			
Number of Shares	Class	Series	Par Value per Share or Statement that Shares are without Par Value
	Class Common	Series_	Par Value Without par v

EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares Class Series Par Value per Share or Statement that Shares are without Par Value or Statement or Statement that Shares are without Par Value or Statement that Shares are without Shares are without

Dated /- 8-, 1973

Charleo, Incorporated Charleo Charleon

By Collifanting H Kontonwards

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To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT

OF

СНАЯ	CC, CHOORPORATED		
Pursuant to the provision mended, the undersigned corp	us of Section 7-1.1-118 of	the General I	Laws, 1956, as
	corporation is Charleo,		
SECOND: It is incorporate	ed under the laws of the S		
	s registered office in Rhode St. Newport, Rhode Islan		
nd the name of its registered Constantine H 1	agent in Rhode Island at su coulouvardis		
FOURTH: If a foreign co	rporation, the address of its	= =	
	he business in which it is act	• ., .,	•
riefly stated, is dealer in re	al estate property		
SIXTH: The names and i	espective addresses of its d Office Director	irectors and off Address	cers are:
	7.		

			44
	Director		
	Director		
Constantine H Koulouvardis	President 19 Pell	St. Newport R	İ
ola A Koulouyardis	Vice President 19 Pell	St. Newport R	I
Lola A Koulouvardis	Secretary 19 Pell	St. Newport R	I
Constantine H Koulouvardis	Treasurer 19 Pell	St. Newport R	
SEVENTH: The aggregate y classes, par value of shares, s	number of shares which it nares without par value, and		
Number of Shares	Class Series	01	Value per Share Statement that ares are without Par Value
25	Certificate 1	1 No	par value
25	Certificate		par value
- *			

FIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	<u>Series</u>	or Statement that Shares are without Par Value
25		Certificate No. 1	No par value
25		Certificate No. 2	No per value

Dated, 1/-4-197

CHARLOO, INCORPORATED (NAME OF CORPORATION)

Procident

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