



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

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

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. **1613** 2. Name of Corporation **AUREA ITALIA, INC.**
3. Street Address Principal Business Office _____ City _____ State _____ Zip _____
4. Business Phone No. **999 Chalkstone Avenue** 5. State of Incorporation **Providence RI 02908**
(401) 351 5700 **RHODE ISLAND** **1883**
7. Brief Description of the Character of Business Conducted in Rhode Island

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

President Name Lawrence R. Buteau Street Address 16 Florence St. City _____ State _____ Zip _____ No. Providence, RI 02904	Vice President Name Paula M. Buteau Street Address 16 Florence St. City _____ State _____ Zip _____ No. Providence RI 02904
Secretary Name Paula M. Buteau Street Address 16 Florence Street City _____ State _____ Zip _____ No. Providence RI 02904	Treasurer Name Paula M. Buteau Street Address 16 Florence St. City _____ State _____ Zip _____ No. Providence RI 02904

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

Director Name _____ Street Address _____ City _____ State _____ Zip _____	Director Name _____ Street Address _____ City _____ State _____ Zip _____
Director Name _____ Street Address _____ City _____ State _____ Zip _____	Director Name _____ Street Address _____ City _____ State _____ Zip _____

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

AUTHORIZED SHARES	Class/Series	Par Value
1000 NO PAR VALUE		

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

ISSUED SHARES	Class/Series	Par Value
200	Common	No par value

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

File Date: 2.17.05
Check No.: 5453
By: [Signature]

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.
Signature of Officer: [Signature] Date: 2-6-05
Print or Type Name of Officer: LAWRENCE R. Buteau
Title of Officer: President



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. **1613** 2. Name of Corporation **AUREA ITALIA, INC.**
3. Street Address Principal Business Office **999 Chalkstone Avenue** City **Providence** State **RI** Zip **02908**
4. Business Phone No. **(401) 351 5700** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **1883**
7. Brief Description of the Character of Business Conducted in Rhode Island

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) **Manufacture, purchase jewelry products**

FILL IN SPACES BEFORE USING ATTACHMENTS

President Name Lawrence R. Buteau Street Address 16 Florence St. City No. Providence RI Secretary Name Paula M. Buteau Street Address 16 Florence Street City No. Providence RI	Vice President Name Paula M. Buteau Street Address 16 Florence St. City No. Providence RI Treasurer Name Paula M. Buteau Street Address 16 Florence St. City No. Providence RI
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9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) **FILL IN SPACES BEFORE USING ATTACHMENTS**

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

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

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

AUTHORIZED SHARES	Class/Series	Par Value	ISSUED SHARES	Class/Series	Par Value
1,000	no par value		200	Common	No Par Value

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

File Date: 2/17/04
Check No.: 4380
By: LB

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.
Lawrence R. Buteau 2/9/04
Signature of Officer Date
LAWRENCE R Buteau
Print or Type Name of Officer
President
Title of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003
Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. **1613** 2. Name of Corporation **AUREA ITALIA, INC.**
3. Street Address Principal Business Office _____ City _____ State _____ Zip _____
999 Chalkstone Avenue Providence RI **02908**
4. Business Phone No. _____ 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **1883**
7. Brief Description of the Character of Business Conducted in Rhode Island

Manufacture, purchase jewelry products

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

President Name Lawrence R. Buteau Street Address 16 Florence St. City _____ State _____ Zip _____ No. Providence RI 02904	Vice President Name Paula M. Buteau Street Address 16 Florence St. City _____ State _____ Zip _____ No. Providence RI 02904
Secretary Name Paula M. Buteau Street Address 16 Florence St. City _____ State _____ Zip _____ No. Providence RI 02904	Treasurer Name Paula M. Buteau Street Address 16 Florence St. City _____ State _____ Zip _____ No. Providence RI 02904

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

Director Name _____ Street Address _____ City _____ State _____ Zip _____	Director Name _____ Street Address _____ City _____ State _____ Zip _____
Director Name _____ Street Address _____ City _____ State _____ Zip _____	Director Name _____ Street Address _____ City _____ State _____ Zip _____

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

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value
1,000	NO PAR VALUE	

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

ISSUED SHARES

Number of Shares	Class/Series	Par Value
200	Common	No par value

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



* 1 6 1 3 *

File Date: 02-21-03

Check No.: 3027

By: [Signature]

FOR SECRETARY OF STATE USE ONLY

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

Signature of Officer: [Signature] Date: _____

Print or Type Name of Officer: PRESIDENT-LAWRENCE R Buteau

Title of Officer: PRESIDENT



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. _____ 2. Name of Corporation **AUREA ITALIA, INC.**

3. Street Address Principal Business Office **1613** City **Providence** State **RI** Zip **02908**
999 Chalkstone Avenue

4. Business Phone No. **(401) 351 5700** 5. State of Incorporation **Rhode Island** 6. SIC Code **1883**

7. Brief Description of the Character of Business Conducted in Rhode Island
Manufacture, purchase jewelry products

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

President Name Lawrence R. Buteau Street Address 16 Florence St. City No. Providence State RI Zip 02904	Vice President Name Paula M. Buteau Street Address 16 Florence St. City No. Providence State RI Zip 02904
Secretary Name Paula M. Buteau Street Address 16 Florence St. City No. Providence State RI Zip 02904	Treasurer Name Paula M. Buteau Street Address 16 Florence St. City No. Providence State RI Zip 02904

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

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

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

AUTHORIZED SHARES	Class/Series	Par Value
1000 SHS	NO PAR VALUE	

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

ISSUED SHARES	Class/Series	Par Value
200	Common	No Par Value

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

File Date: 2/20/02 20 11 02
Check No.: 1971
By: [Signature]
FOR SECRETARY OF STATE USE ONLY

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

[Signature] 2-11-02
Signature of Officer Date
LAWRENCE R Buteau
Print or Type Name of Officer
President
Title of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **1613** 2. Name of Corporation **AUREA ITALIA, INC.**

3. Street Address Principal Business Office **999 Chalkstone Avenue** City **Providence** State **RI** Zip **02908**
4. Business Phone No. **(401) 351 5700** 5. State of Incorporation **RHODE ISLAND** 6. State of Report **RI** Zip **02908**

7. Brief Description of the Character of Business Conducted in Rhode Island
Manufacture, purchase jewelry products

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

President Name Lawrence R. Buteau Street Address 16 Florence St. City No. Providence State RI Zip 02904	Vice President Name Paula M. Buteau Street Address 16 Florence St. City No. Providence State RI Zip 02904
Secretary Name Paula M. Buteau Street Address 16 Florence St. City No. Providence State RI Zip 02904	Treasurer Name Paula M. Buteau Street Address 16 Florence St. City No. Providence State RI Zip 02904

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

Director Name Street Address City No. Providence State RI Zip 02904	Director Name Street Address City No. Providence State RI Zip 02904
Director Name Street Address City No. Providence State RI Zip 02904	Director Name Street Address City No. Providence State RI Zip 02904

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

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value
1000 SHS	NO PAR VAL	

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

ISSUED SHARES

Number of Shares	Class/Series	Par Value
200	Common	No Par Value

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



* 1 6 1 3 *

File Date: 3-26-01
Check No.: 1184
By: [Signature]

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

[Signature]
Signature of Officer Date
LAWRENCE R. BUTEAU
Print or Type Name of Officer
President
Title of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000
Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **1613** 2. Name of Corporation **AUREA ITALIA, INC.**
3. Street Address Principal Business Office **95 Chestnut St.** City **Providence** State **RI** Zip **02903**
4. Business Phone No. **(401) 351 5700** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **1883**
7. Brief Description of the Character of Business Conducted in Rhode Island

Manufacture, purchase jewelry products

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

President Name Lawrence R. Buteau Street Address 16 Florence St. City No. Providence State RI Zip 02904	Vice President Name Paula M. Buteau Street Address 16 Florence St. City No. Providence State RI Zip 02904
Secretary Name Paula M. Buteau Street Address 16 Florence St. City No. Providence State RI Zip 02904	Treasurer Name Paula M. Buteau Street Address 16 Florence St. City No. Providence State RI Zip 02904

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

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

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

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value
1000 SHS	NO PAR	VAL

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

ISSUED SHARES

Number of Shares	Class/Series	Par Value
200	Common	no par value

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



* 1 6 1 3 *

3/2/00

File Date: _____

Check No.: 58413

By: [Signature]

FOR SECRETARY OF STATE USE ONLY

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

Lawrence R. Buteau 2/25/00
Signature of Officer Date

LAWRENCE R. BUTEAU
Print or Type Name of Officer

President
Title of Officer



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. 1613		2. Name of Corporation AUREA ITALIA, INC.	
3. Street Address Principal Business Office 95 Chestnut St.			
4. Business Phone No. (401) 351 5700		5. State of Incorporation RHODE ISLAND	
City Providence,		State RI	
Zip 02903		6. SIC Code 1883	
7. Brief Description of the Character of Business Conducted in Rhode Island manufacture, purchase jewelry products			
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name Lawrence R. Buteau		Vice President Name Paula M. Buteau	
Street Address 16 Florence St.		Street Address 16 Florence St.	
City No. Providence RI		City No. Providence RI	
State RI		State RI	
Zip 02904		Zip 02904	
Secretary Name Paula M. Buteau		Treasurer Name Paula M. Buteau	
Street Address 16 Florence St.		Street Address 16 Florence St.	
City No. Providence RI		City No. Providence RI	
State RI		State RI	
Zip 02904		Zip 02904	
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS			
Director Name		Director Name	
Street Address		Street Address	
City		City	
State		State	
Zip		Zip	
Director Name		Director Name	
Street Address		Street Address	
City		City	
State		State	
Zip		Zip	
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)			
AUTHORIZED SHARES			
Number of Shares	Class/Series	Par Value	
1000 SHS NO PAR VAL			
11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)			
ISSUED SHARES			
Number of Shares	Class/Series	Par Value	
200	common	no par value	

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



* 1 6 1 3 *

File Date: May 2 1999

Check No.: 4232

By: [Signature]

FOR SECRETARY OF STATE USE ONLY

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

Lawrence R. Buteau 1-7-99
Signature of Officer Date

President Lawrence R. Buteau
Print or Type Name of Officer

President
Title of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1998

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **1613** 2. Name of Corporation **AUREA ITALIA, INC.**
3. Street Address Principal Business Office **95 Chestnut St.** City **Providence,** State **RI** Zip **02903**
4. Business Phone No. **(401) 351 5700** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **1883**

7. Brief Description of the Character of Business Conducted in Rhode Island
manufacture, purchase jewelry products

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

President Name Lawrence R. Buteau	Vice President Name Paula M. Buteau
Street Address 16 Florence St.	Street Address 16 Florence St.
City No. Providence State RI Zip 02904	City No. Providence State RI Zip 02904
Secretary Name Paula M. Buteau	Treasurer Name Paula M. Buteau
Street Address 16 Florence St.	Street Address 16 Florence St.
City No. Providence, State RI Zip 02904	City No. Providence, State RI Zip 02904

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) **NONE**

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 AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value
1000 SHS	NO PAR VAL	

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

ISSUED SHARES

Number of Shares	Class/Series	Par Value
200	common	no par common

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



File Date: 2-18-98
Check No.: 3185
By: KP
FOR SECRETARY OF STATE USE ONLY

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

Signature of Officer: [Signature] Date: 2-12-98
Print or Type Name of Officer: President - Lawrence R Buteau
Title of Officer: President



PROFIT CORPORATION ANNUAL REPORT 1997

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 2. Name of Corporation
1613 AUREA ITALIA, INC.
3. Street Address Principal Business Office City State Zip
95 Chestnut St. Providence RI 02903
4. Business Phone No. 5. State of Incorporation 6. SIC Code
(401) 351-5700 RHODE ISLAND 1883
7. Brief Description of the Character of Business Conducted in Rhode Island

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

President Name	Vice President Name
Lawrence R. Buteau	Paula M. Buteau
Street Address	Street Address
16 Florence St.	16 Florence St.
City State Zip	City State Zip
No. Providence RI 02904	No. Providence RI 02904
Secretary Name	Treasurer Name
Paula M. Buteau	Paula M. Buteau
Street Address	Street Address
16 Florence St.	16 Florence St.
City State Zip	City State Zip
Providence RI 02904	Providence RI 02904

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

Director Name	Director Name
None	
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 AND ISSUED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1000	Shares No Par Value		200	common	no 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 that all statements contained herein are true and correct.

File Date: 2/27/97
Check No.: 204
By: [Signature]

[Signature] 2/11/97
Signature of Officer Date
Lawrence R. Buteau
Print or Type Name of Officer
President
Title of Officer

PROFIT CORPORATION ANNUAL REPORT

1996



State of Rhode 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 PRINT IN BLACK INK.

1. CORPORATE ID NO. 1613		2. NAME OF CORPORATION AUREA ITALIA, INC.	
3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE 95 Chestnut Street		CITY Providence	STATE RI
		ZIP CODE 02903	
4. BUSINESS PHONE NO. (401) 351-5700	5. STATE OF INCORPORATION RHODE ISLAND		6. SIC CODE
7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND manufacture, purchase jewelry products			

8. NAMES AND ADDRESSES OF THE OFFICERS

PRESIDENT NAME Lawrence R. Buteau			VICE PRESIDENT NAME Paula M. Buteau		
STREET ADDRESS 16 Florence Street			STREET ADDRESS 16 Florence Street		
CITY North Providence	STATE RI	ZIP CODE 02904	CITY North Providence	STATE RI	ZIP CODE 02904
SECRETARY NAME Paula M. Buteau			TREASURER NAME Paula M. Buteau		
STREET ADDRESS 16 Florence Street			STREET ADDRESS 16 Florence Street		
CITY North Providence	STATE RI	ZIP CODE 02904	CITY North Providence	STATE RI	ZIP CODE 02904

9. NAMES AND ADDRESSES OF THE DIRECTORS

DIRECTOR NAME			DIRECTOR NAME		
STREET ADDRESS			STREET ADDRESS		
CITY	STATE	ZIP CODE	CITY	STATE	ZIP CODE
DIRECTOR NAME			DIRECTOR NAME		
STREET ADDRESS			STREET ADDRESS		
CITY	STATE	ZIP CODE	CITY	STATE	ZIP CODE

10. SHARES AUTHORIZED AND ISSUED

AUTHORIZED SHARES			ISSUED SHARES		
NUMBER OF SHARES	CLASS / SERIES	PAR VALUE	NUMBER OF SHARES	CLASS / SERIES	PAR VALUE
1000 SHS	NO PAR VAL		200	common	no 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 that all statements contained herein are true and correct.

File Date:

2/26/96

Check No:

1433

By:

CP

For Secretary of State Use Only

Signature of Officer

President-Lawrence R. Buteau

President

2-20-96

Date



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.

Corporate ID: 0001613 Annual Report for the year: 1995

Name of Corporation: AUREA ITALIA, INC.

Business entity organized under the laws of the State of: Rhode Island
 For foreign entity, address and telephone number of principal office:

Business Entity is (check one):
 Business Corporation (See RIGL Chapter 7-1.1)
 Professional Service Corporation (See RIGL Chapter 7-5.1)

Phone: () _____

Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):
95 Chestnut Street
Providence, RI 02903

Phone: (401) 351.5700

Brief statement of the character of business conducted in Rhode Island:
manufacture, purchase jewelry
products

THE NAMES OF THE OFFICERS ARE:

PRESIDENT	STREET ADDRESS	CITY/STATE	ZIP CODE
Lawrence R. Buteau	16 Florence Street	North Providence, RI	02904
VICE PRESIDENT	STREET ADDRESS	CITY/STATE	ZIP CODE
Paula M. Buteau	16 Florence Street	North Providence, RI	02904
SECRETARY	STREET ADDRESS	CITY/STATE	ZIP CODE
Paula M. Buteau	16 Florence Street	North Providence, RI	02904
TREASURER	STREET ADDRESS	CITY/STATE	ZIP CODE
Paula M. Buteau	16 Florence Street	North Providence, RI	02904

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE

NUMBER OF SHARES AUTHORIZED (Rider may be attached)		NUMBER OF SHARES ISSUED AND OUTSTANDING (Rider may be attached)	
Number of Shares	Class / Series	Number of Shares	Class / Series
1000	common	200	common

Date 2-14, 19 95 By: AUREA ITALIA, INC.
 PRINT OR TYPE NAME OF OFFICER SIGNING Lawrence R. Buteau
 TITLE OF OFFICER SIGNING President

DESIGNATED REGISTERED AGENT FOR SERVICE OF PROCESS:

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

ROBERT P. VERI, ESQ.
 95 CHESTNUT STREET
 PROVIDENCE RI 02903

FILED
FEB 24 1995
 By Cc 9899

Filing Fee \$50.00
Payable to:
Secretary of State

PLEASE TYPE or PRINT
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

File Annually
LLC: Sept. 1 - Nov. 1
CORP: Jan. 1 - March 1

Corporate ID: 0001613 Annual Report for the year: 1994

Name of Business Entity AUREA ITALIA, INC.

Business entity organized under the laws of the State of: Rhode Island

Federal Taxpayer Identification Number: _____

For foreign entity, address and telephone number of principal office:

Phone: () _____

Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):

95 Chestnut Street
Providence, RI 02903

Phone: (401) 351-5700

Business Entity is (check one):

- Business Corporation (See RIGL Chapter 7-1.1)
 Professional Service Corporation (See RIGL Chapter 7-5.1)
 Limited Liability Company (See RIGL 7-16)

Name, title and mailing address of contact person to whom communications may be directed:

Robert P. Verri

ABRAMS & VERRI

95 Chestnut Street
Providence, RI 02903

Brief statement of the character of business conducted in Rhode Island:
manufacture, purchase, etc. jewelry
products

Date of Organization: 12/31/82 MF2

Date of Qualification to do business in Rhode Island (if foreign entity): _____

THE NAMES OF THE OFFICERS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
<input type="checkbox"/> CHIEF EXECUTIVE OFFICER OR <input checked="" type="checkbox"/> PRESIDENT (Check One) <u>Lawrence R. Buteau</u>	<u>16 Florence St.</u>	<u>No. Providence, RI</u>	<u>02904</u>
<input type="checkbox"/> CHIEF OPERATING OFFICER OR <input checked="" type="checkbox"/> VICE PRESIDENT (Check One) <u>Paula M. Buteau</u>	<u>16 Florence St.</u>	<u>No. Providence, RI</u>	<u>02904</u>
<input type="checkbox"/> CUSTODIAN OF RECORDS OR <input checked="" type="checkbox"/> SECRETARY (Check One) <u>Paula M. Buteau</u>	<u>16 Florence St.</u>	<u>No. Providence, RI</u>	<u>02904</u>
<input type="checkbox"/> CHIEF FINANCIAL OFFICER OR <input checked="" type="checkbox"/> TREASURER (Check One) <u>Paula M. Buteau</u>	<u>16 Florence St.</u>	<u>No. Providence, RI</u>	<u>02904</u>

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
NAME	STREET ADDRESS	CITY/STATE	ZIP CODE

NUMBER OF SHARES AUTHORIZED (If Applicable)		NUMBER OF SHARES ISSUED AND OUTSTANDING (If Applicable)	
NUMBER	<u>1000</u>	NUMBER	<u>200</u>
CLASS	<u>Common</u>	CLASS	<u>Common</u>
SERIES		SERIES	
PAR VALUE OR WITHOUT PAR	<u>without par value</u>	PAR VALUE OR WITHOUT PAR	<u>without par value</u>

Date Feb 15 1994

FILED
MAR 31 1994
By 102 8901

By AUREA ITALIA, INC.
Lawrence R. Buteau

PRINT OR TYPE NAME OF OFFICER SIGNING
President

TITLE OF OFFICER SIGNING

Form 31 1994

DESIGNATED REGISTERED OR RESIDENT AGENT FOR SERVICE OF PROCESS:

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

FILED

ROBERT P. VERI, ESQ
95 CHESTNUT ST.
PROVIDENCE RI 02903

By _____

Filing Fee \$50.00

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

77319B
State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 1613 Annual Report for the year 1993

FIRST: The name of the corporation is AUREA ITALIA, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is manufacture, purchase, etc. jewelry products

FOURTH: If foreign corporation, address of its principal office.....

FIFTH: Business address in Rhode Island 95 Chestnut St., Providence, RI 02903

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
.....	Director	.....
.....	Director	.....
.....	Director	.....
Laurence R. Buteau	President	16 Florence St., No. Providence, RI 02904
Paula M. Buteau	Vice President	16 Florence St., No. Providence, RI 02904
Paula M. Buteau	Secretary	16 Florence St., No. Providence, RI 02904
Laurence R. Buteau	Treasurer	16 Florence St., No. Providence, RI 02904

SEVENTH: Number of Shares authorized:

No. of Shares	Class
1000	Common

Par Value
or statement that
shares are without
par value

Without par
value

EIGHTH: Number of Shares issued:

No. of Shares	Class
200	Common

Par Value
or statement that
shares are without
par value

Without par
value

Dated 1-14-93 19.....

AUREA ITALIA, INC.

(Name of Corporation)

By Laurence R. Buteau

Title President

(Report must be signed by an officer)

PAID
MAR 30 1993
SECY OF STATE

Filing Fee \$15.00

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

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903

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Ch. 5320

Corporate ID 1613 Annual Report for the year 1992

FIRST: The name of the corporation is AUREA ITALIA, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is manufacture, purchase, etc. jewelry products

FOURTH: If foreign corporation, address of its principal office.....

FIFTH: Business address in Rhode Island 95 Chestnut St., Providence, RI 02903

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
.....	Director	.....
.....	Director	.....
.....	Director	.....
Laurence R. Buteau	President	16 Florence St., No. Providence, RI 02904
Paula M. Buteau	Vice President	16 Florence St., No. Providence, RI 02904
Paula M. Buteau	Secretary	16 Florence St., No. Providence, RI 02904
Laurence R. Buteau	Treasurer	16 Florence St., No. Providence, RI 02904

SEVENTH: Number of Shares authorized:

No. of Shares	Class
1000	Common

Series

PAID

MAR 31 1992

SEC'Y OF STATE

Series

Par Value or statement that shares are without par value

Without par value

EIGHTH: Number of Shares issued:

No. of Shares	Class
200	Common

Par Value or statement that shares are without par value

Without par value

Dated March 15 19 92

AUREA ITALIA, INC.

(Name of Corporation)

By Laurence R. Buteau

Title President

(Report must be signed by an officer)

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

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903

55

Corporate ID 1613 Annual Report for the year 1991

FIRST: The name of the corporation is AUREA ITALIA, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is manufacture, purchase, etc., jewelry products

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island
95 Chestnut Street, Providence, RI 02903

SIXTH: Names and addresses of its directors and officers (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
<u>Laurence Buteau</u>	<u>President</u>	<u>16 Florence St, No Providence, RI</u>
<u>Paula M. Buteau</u>	<u>Vice President</u>	<u>16 Florence St, No Providence, RI</u>
<u>Paula M. Buteau</u>	<u>Secretary</u>	<u>16 Florence St, No Providence, RI</u>
<u>Laurence Buteau</u>	<u>Treasurer</u>	<u>16 Florence St, No Providence, RI</u>

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
<u>1000</u>	<u>Common</u>	<u>PAID - - - PAID</u>	<u>Without par value</u>

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
<u>200</u>	<u>Common</u>	<u>SECY OF STATE</u>	<u>Without par value</u>

PAID - - - PAID
MAR 26 1991
SECY OF STATE
SECY OF STATE

Dated 19

AUREA ITALIA, INC.
(Name of Corporation)

By Laurence Buteau
Title President

(Report must be signed by an officer)

Filing Fee \$15.00

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

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903

At

Corporate ID 1613

Annual Report for the year 1990

FIRST: The name of the corporation is AUREA ITALIA, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is
manufacture, purchase, etc. jewelry products.

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 95 Chestnut Street, Providence, RI 02903

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
Larry Buteau	President	16 Florence St., No. Providence, RI
Paula Buteau	Vice President	16 Florence St., No. Providence, RI
Paula Buteau	Secretary	16 Florence St., No. Providence, RI
Larry Buteau	Treasurer	16 Florence St., No. Providence, RI

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
1000	Common	--	Without Par Value

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
200	Common		Without Par Value

PAID
APR 3 1990
Series
SECY-OF STATE

Dated 1-6-90 19

AUREA ITALIA, INC.
(Name of Corporation)

By Larry Buteau
Title President

(Report must be signed by an officer)

Filing Fee \$15.00

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

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 1613 Annual Report for the year 1989

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THIRD: Character of business, briefly stated, is
manufacture, purchase, etc. jewelry products.

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 95 Chestnut St., Providence, RI 02903

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
Larry Buteau	President	16 Florence St., No. Providence, RI
Paula Buteau	Vice President	16 Florence St., No. Providence, RI
Paula Buteau	Secretary	16 Florence St., No. Providence, RI
Larry Buteau	Treasurer	16 Florence St., No. Providence, RI

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
1000	Common	--	Without Par Value

PAID

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
200	Common	--	Without Par Value

FEB 21 1989

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Dated 1-25-89 19 89

AUREA ITALIA, INC.
(Name of Corporation)

By Larry Buteau
Title President

(Report must be signed by an officer)

Filing Fee \$15.00

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

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 1613 Annual Report for the year 1988

FIRST: The name of the corporation is AUREA ITALIA, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is manufacture, purchase, etc. jewelry products

FOURTH: If foreign corporation, address of its principal office.....

FIFTH: Business address in Rhode Island 95 Chestnut St., Providence, RI 02903

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
.....	Director	.....
.....	Director	.....
.....	Director	.....
Larry Buteau	President	16 Florence St., No. Providence, RI
Paula Buteau	Vice President	16 Florence St., No. Providence, RI
Paula Buteau	Secretary	16 Florence St., No. Providence, RI
Larry Buteau	Treasurer	16 Florence St., No. Providence, RI

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
1000	common	- -	without par value

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
200	common	- -	without par value

Dated 2/4 19 88

AUREA ITALIA, INC.
(Name of Corporation)
By Larry Buteau
Title President

(Report must be signed by an officer)

Filing Fee \$15.00

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

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 1613 Annual Report for the year 1987

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manufacture, purchase, etc. jewelry products

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FIFTH: Business address in Rhode Island 95 Chestnut St., Providence, RI 02903

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
.....	Director	.....
.....	Director	.....
.....	Director	.....
<u>Larry Buteau</u>	<u>President</u>	<u>16 Florence St., No. Providence, RI</u>
<u>Paula Buteau</u>	<u>Vice President</u>	<u>16 Florence St., No. Providence, RI</u>
<u>Paula Buteau</u>	<u>Secretary</u>	<u>16 Florence St., No. Providence, RI</u>
<u>Larry Buteau</u>	<u>Treasurer</u>	<u>16 Florence St., No. Providence, RI</u>

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
<u>1000</u>	<u>common</u>	<u>- -</u>	<u>without par value</u>

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
<u>200</u>	<u>common</u>	<u>- -</u>	<u>without par value</u>

ENTERED NOV 17 1987

Dated April 20, 1987

AUREA ITALIA, Inc.
(Name of Corporation)

By Larry Buteau
Title President

(Report must be signed by an officer)

PAID
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State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 1613 Annual Report for the year 1987

FIRST: The name of the corporation is AUREA ITALIA, INC.

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FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 95 Chestnut St., Providence, RI 02903

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
Larry Buteau	President	16 Florence St., No. Providence, RI
Paula Buteau	Vice President	16 Florence St., No. Providence, RI
Paula Buteau	Secretary	16 Florence St., No. Providence, RI
Larry Buteau	Treasurer	16 Florence St., No. Providence, RI

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
1000	common	- -	without par value

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
200	common	- -	without par value

11/19/87 PAID 0029A001

Dated March 12, 1987

NOV 17 1987

(Report must be signed by an officer)

AUREA ITALIA, Inc.
(Name of Corporation)

By Larry Buteau
Title President

Filing Fee \$15.00

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

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 1613 Annual Report for the year 1986

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jewelry products.

FOURTH: If foreign corporation, address of its principal office.....

FIFTH: Business address in Rhode Island 95 Chestnut Street, Providence, RI 02903

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
------	--------	--

.....	Director	.....
.....	Director	.....
.....	Director	.....
<u>Larry Buteau</u>	<u>President</u>	<u>16 Florence St., No. Prov., RI</u>
<u>Paula Buteau</u>	<u>Vice President</u>	<u>16 Florence St., No. Prov., RI</u>
<u>Paula Buteau</u>	<u>Secretary</u>	<u>16 Florence St., No. Prov., RI</u>
<u>Larry Buteau</u>	<u>Treasurer</u>	<u>16 Florence St., No. Prov., RI</u>

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
1000	common	PAID APR - 9 1986 ---	without par value

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
200	common	---	without par value

Dated March 1 1986 AUREA ITALIA, INC.

(Name of Corporation)

JUN 24 ENT'D

By Larry Buteau

Title President

(Report must be signed by an officer)

Filing fee: \$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

corp. number 1613

Annual Report for the year 1985

FIRST: The name of the corporation is

AUREA ITALIA, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is

manufacture, purchase, etc. jewelry products

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island

95 Chestnut Street, Providence, Rhode Island 02903

SIXTH: Names and addresses of its directors and officers:

(Addresses must include street and number, if any)

Name	Office	Address
	Director	
	Director	
	Director	
Larry Buteau	President	16 Florence St., No. Providence, RI
	Vice President	
Joseph Umbriano	Secretary	16 Florence St., No. Providence, RI
Joseph Umbriano	Treasurer	16 Florence St., No. Providence, RI

(If additional space is needed, attach rider)

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
1,000	Common	- -	Without par value

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
200	Common	- -	Without par value

Dated: 2/5 19 85

AUREA ITALIA, INC.
(Name of Corporation)

By: *Larry Buteau*
Larry Buteau
Title President

(Report must be signed by an officer)

RECEIVED MAR 1985

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

Filing fee: \$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 for the year 1984

FIRST: The name of the corporation is AUREA ITALIA, INC.

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FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island (blank reports will be mailed to this address) 189 Governor Street, Providence, RI 02096

SIXTH: Names and addresses of its directors and officers:

(Addresses must include street and number, if any)

Name	Office	Address
	Director	
	Director	
	Director	
Larry Buteau	President	16 Florence St., No. Providence, RI
	Vice President	
Joseph Umbriano	Secretary	16 Florence St., No. Providence, RI
Joseph Umbriano	Treasurer	16 Florence St., No. Providence, RI

(If additional space is needed, attach rider)

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
1000	Common	- -	Without par value

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
200	Common	- -	Without par value

Dated: APR 6, 1984

AUREA ITALIA, INC.
(Name of Corporation)

By: Larry Buteau

Title: (Report must be signed by an officer)

APR 17 1984

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

Filing fee: \$15.00

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

MF

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

Annual Report for the year 1983

FIRST: The name of the corporation is AUREA ITALIA, INC.

SECOND: It is incorporated under the laws of Rhode Island

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FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island (blank reports will be mailed to this address) 189 Governor St., Providence, RI 02906

SIXTH: Names and addresses of its directors and officers:

(Addresses must include street and number, if any)

Name	Office	Address
	Director	
	Director	
	Director	
Larry Buteau	President	16 Florence St. No. Providence, RI
	Vice President	
Joseph Umbriano	Secretary	16 Florence St. No. Providence, RI
Joseph Umbriano	Treasurer	16 Florence St. No. Providence, RI

(If additional space is needed, attach rider)

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
1000	common	- -	Without par value

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
200	common	- -	Without par value

Dated: Jan 6 1983

APR 14 1983

AUREA ITALIA, INC.

(Name of Corporation)

Larry Buteau
President

(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