



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

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

Amended

PROFIT CORPORATION ANNUAL REPORT 1997

Filing Period: January 1-March 1 • Filing Fee: ~~\$30.00~~

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 87913 2. Name of Corporation NEW ENGLAND LIVE AUDIO, INC.

3. Street Address Principal Business Office 64 Rodman Street

City Woonsocket

State RI

Zip 02895

4. Business Phone No. (401) 762-0687

5. State of Incorporation Rhode Island

6. SIC Code

7. Brief Description of the Character of Business Conducted in Rhode Island Sound Reinforcement/Rental Production Services

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

President Name Jennifer A. Lorchay

Street Address 64 Rodman St.

City Woonsocket State RI

Zip 02895

Vice President Name Jacques A. Lorchay

Street Address 64 Rodman St.

City Woonsocket State RI

Zip 02895

Secretary Name Jennifer A. Lorchay

Street Address 64 Rodman St.

City Woonsocket State RI

Zip 02895

Treasurer Name Jacques A. Lorchay

Street Address 64 Rodman St.

City Woonsocket State RI

Zip 02895

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

Director Name Jennifer A. Lorchay

Street Address 64 Rodman St.

City Woonsocket State RI

Zip 02895

Director Name

Street Address

City

State

Zip

Director Name Jacques A. Lorchay

Street Address 64 Rodman St.

City Woonsocket State RI

Zip 02895

Director Name

Street Address

City

State

Zip

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

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

100 shares NO par value

ISSUED SHARES

Number of Shares

Class/Series

Par Value

100

NONE

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

File Date: 4/10/97

Check No.: No Fee-Amended

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.

Jennifer A Lorchay 4-10-97

Signature of Officer

Date

Jennifer A Lorchay

Print or Type Name of Officer

President

Title of Officer