

A. Ralph Mollis, Secretary of State
Corporations Dussion
148 W. Rwer Street
Providence, RI 02901-2615

401 222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

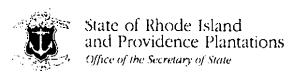
Filing Period: January 1 - March 1 • Filing Fee: \$50.00* THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK * In accordance with R.I.G.L. 7-1.2-1501(e), each corporation falling or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(e5d)) is subject to a penalty fee of \$25.00.

1 Capeante II) No. 96915		2 Name of Corporation Construct Oil Company, Inc.					
3 Street Address Principal Business Office 27 Dexter Road			City East Providence	State RI	Ζφ 02914		
4 Business Phone No 401-431-5060	James of the September 19 the September						
6 Brief Description of the C Sales and delivery of	haracter of Business Conducts of Petrleum Products	ted ni Rhode Island					
7. NAMES AND ADDI	RESSES OF THE OFFI	CERS: ("X" BOX FOR	ATTACHMENT) FILL IN SP	ACES BEFORE USING	ATTACHMENTS		
Richard Workman	1		None None				
Sirea Address 77 Second Street		 	Mreet Address	·			
Somerville	state NJ	^{Zφ} 08876	Guy	State	Zip		
Secretary Name Mark O'Leary			Tressiver Name None				
27 Dexter Road			Street Address	Street Address			
Car East Providence	State RI	Zφ 02914	Gly	Stare	Δφ		
	RESSES OF THE DIRE	CTORS: ("X" BOX FOR	RATTACHMENT) 📋 FILL IN :	SPACES BEFORE USIN	G ATTACHMENTS		
Director Name Richard Workman	t		Director Name			•	
Street Address			Street Address	-			
77 Second Street	 .				in the second		
Somerville	State NJ	71p 08876	City	State	7.10 ·		
Director Name			Director Name		ย.ล	•••••	
George F. Taylor	_						
77 Second Street			Street Address		12:		
Somerville	State NJ	<i>Ζφ</i> 08876	Cuy	State	1 K		
	IZED ("X" BOX FOR	ATTACHMENT) [10. SHARES ISSUED (HMENT) []	, ,	
AUTHORIZED SHARES Anniber of Shares Class'Scales Par Value		ISSUED SHARES — THIS SECT	<u> </u>				
Samuel of States	Classisches	Par Value	Number of Shares	Class/Series	Par Value		
500 Common \$1.00		500	Common	\$1.00			
This report must be ex-	xecuted on behalf of the	e corporation by an auth	norized representative. If the con	rporation is in the hand	s of a receiver or truste	e,	

File Date	FILED
Check No.	— APR 0 2 2007 —
Bv	FOR SECRET VECOLOGIATION ONLY
	21872

including any appompanying schedule	d affirm that I have examined this report, and statements, and that all statements
contained hereful are true and correct.	3/15/0
Signature	Date
Richard Workman	
Print or Type Name	
President	
Title	

Form 630 Rev. 12/06



A. Ralph Mollis, Secretary of State Corporations Dailson 148 W. River Street Providence, RI 02904-2615

401 222 3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR _____ 2004

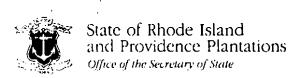
Filing Period: January 1 - March 1 • Filing Fee: \$50.00* THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK
• In accordance with R.I.G.L. 7-1.2-1501(c), each corporation falling or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

	501(c&d)) is subject to a					
/ Gaporate ID No 96915 		2 Name of Corporation Construct Oil Company, Inc.				
Novel Address Principal Business Office 27 Dexter Road		City East Providence	State RI	2φ 02914		
4 Business Phone No 401-431-5060				·		
6 Brief Description of the Sales and delive	the Character of Business Con- ery of Petrleum Products	lucted in Rhode Island S				
	DDRESSES OF THE OF	FICERS: ("X" BOX FOR A	TTACHMENT) 🔲 FILL IN S	PACES BEFORE USING	ATTACHMENTS	
President Name			Vice President Name			
Richard Workm	ian	<u> </u>	None			
77 Second Stre	et		Street Address			
Somerville	Strue NJ	^{Zip} 08876	Cuy	State	ZΨ	
Secretary Name Mark O'Leary			Treasurer Name None			
Street Address 27 Dexter Road	t		Sirvet Address			
East Providence	e RI	2φ 02914	City	State	Zip	
8. NAMES AND A	DDRESSES OF THE DI	RECTORS: ("X" BOX FOR	ATTACHMENT) 🗍 FILL IN	SPACES BEFORE USIN	G ATTAQHMENTS	
Director Name Richard Workm	nan		Director Name		, 1	
Street Address			Street Address		زيتر	
77 Second Stre	et				I	
Cata	State	Zιρ	City	State	Ap .	
Somerville	ŊJ	08876				
George F. Tayl	or		Director Name		r <u>?</u>	
Street Address 77 Second Street	et		Street Address		05 <i>e</i> r	
On Somerville	State NJ	×φ 08876	Cuy	State	Zip	
9. SHARES AUTHO	ORIZED <i>("X" BOX FO</i>	R ATTACHMENT) 🗌	10. SHARES ISSUED	("X" BOX FOR ATTAC	HMENT) 🗌	
AUTHORIZED SHARES		ISSUED SHARES THIS SEC	TION MUST BE COMPLETED	•		
Monther of Shaves	Class/Senes	Par Value	Number of Shares	ClasvSenes	Par Adue	
500 Common \$1.00		500	Common	\$1.00		
This report must be	e executed on behalf of	the corporation by an authoritie corporation by the recei	orized representative. If the co	orporation is in the hand	s of a receiver or trustee,	
•	, should the ochair th	and corporation by the recei	rei of ituatee.			

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Under penalty of perjury, I declare and at including any accompanying schedules a	
contained hereiffare true and correct.	3/15/07
Signature	Date
Richard Workman	
Print or Type Name	
President	
Tule	

Form 630 Rev. 12/06



A. Ralph Mollis, Secretary of State Corporations Division 148 W. Rwer Street Providence, RI 02904-2615

401 222 3940

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR _____ 2003

Filing Period: January 1 · March 1 • Filing Fee: \$50.00* THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK
* In accordance with R.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c6d)) is subject to a penalty fee of \$25.00.

law (R.I.G.L. 7-1.2-156 1 Corporate II) No	2 Name of Corpo				<u>-</u>
96915	<u>l</u>	il Company, Inc.	<u> </u>	<u> </u>	,
1. Sirvet Address Principal Business Office 27 Dexter Road		East Providence	State RI	02914	
4 Business Phone No 401-431-5060		State of Incorporate Massachusett			
	e Character of Business Conductory of Petrleum Products	ed in Rhode Island			
	DRESSES OF THE OFFIC	ERS: ("X" BOX FOR A	I <i>TTACHMENT</i>) 🗌 FILL IN SI	PACES BEFORE USING	ATTACHMENTS
President Name			Vice President Name		
Richard Workma			None		<u> </u>
Street Address 77 Second Street	et		Street Address		
Con- Somerville	State NJ	Zφ 08876	City	State	Ζφ
Secretary Name Mark O'Leary	······	······································	Treasurer Same None		······
Street Address 27 Dexter Road			Street Address		
Carrell East Providence	State RI	Ζφ 02914	City	State	Z ₁ p
8. NAMES AND AD	DRESSES OF THE DIREC	CTORS: ("X" BOX FOR	RATTACHMENT) 🗍 FILL IN	SPACES BEFORE USIN	G ATTACHMENTS 💎
Director Name Richard Workma	an		Director Name		
Street Address		<u> </u>	Street Address		53
77 Second Stree	Ť	т.		T.	i
City Compositio	State	^{Ζφ} 08876	City	State	Zip NO
Somerville Director Name	JNJ	100010	Director Name	l	
George F. Taylo	or		***************************************		5 5 e
Street Address			Street Address		
77 Second Stree					<u> </u>
City	State NJ	∠φ 08876	Gity	State	Zip
Somerville	l l	<u> </u>	10 011 1010 1001 101	/	HEREN -
AUTHORIZED SHARES	PRIZED ("X" BOX FOR	STACHMENT) [•	<i>("X" BOX FOR ATTAC.</i> TION <u>must</u> be completed	
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
500	Common	\$1.00	500	Common	\$1.00
	·-····				
			•		

Fiic Date	FILED
Check No.	APR 02 2007
Bv	By 00 21842
ŀ	OR SECRETARY OF STATE USE ONLY

Under Jenalty of perjury, I declare and af including any occumpanying schedules a	
contained herein are true and correct.	7
Million	3/15/07
Signature	Date
Richard Workman	
Print or Type Name	
President	
Tale	



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

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

(FORM MUST BE TYPED IN BLACK)

2. Name of Corporation

Bowen Oil, Inc.

3. Street Address Principal Business Office

City Warwick State

Rhode Island

ZIp

53B Harrington Avenue 4. Business Phone No.

5. State of Incorporation

02888 6. SIC Code

401-461-5060

Massachusetts

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

Sale and Delivery of Petroleum Products

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

President Name

Vice President Name

Robert Kiernan

Street Address

Street Address

53B Harrington Avenue

Zip

State

ZIp

Warwick Secretary Name

02888 ... Rhode Island

Treasurer Name

Mark O'Leary

Street Address

Street Address

53B Harrington Avenue

Warwick

02888

City

State

2.10

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

Director Nome

Director Name

George F. Taylor

77 Second Street

Street Address

Richard Workman

Street Address

77 Second Street

Zip

Somerville,

NJ

08876

Somerville

08876

Director Name

NJ

Director Name

Street Address

Street Address

City

Zip

City

State

Zip

7-15-02 Date

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

State

AUTHORIZED SHARES Number of Shares

Class/Series Par Value

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

ISSUED SHARES

Number of Shares

Class/Series

Par Value

500

Common

\$1.00

500

Common

\$1.00

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

FOR SECRETARY OF STATE USE ONLY

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

Signature of Officer

<u>Robert Kiernan</u> Print or Type Name of Officer

President

Title of Officer **5**

Form 630 12/01

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 2001

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

(FORM MUST BE TYPED IN BLACK)

I. Corporate ID No.

4. Business Phone No.

2. Name of Corporation

Bowen Oil, Inc.

3. Street Address Principal Business Office

City

Zip

53B Harrington Avenue

5. State of Incorporation

Rhode Island

02888 6. SIC Code

401-461-5060

Massachusetts

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

Sale and Delivery of Petroleum products

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

President Name

Vice President Name

Warwick

Robert Kiernan

Street Address

Street Address

53B Harrington Avenue

53B Harrington Avenue

Zip

City

State

State

FILL IN SPACES BEFORE USING ATTACHMENTS

Zip

Warwick Secretary Name

Rhode Island 02888

Treasurer Name

City

Mark O'Leary

Street Address

Street Address

02888

Warwick

Rhode Island

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

George F. Taylor

Street Address

Director Name

Richard Workman Street Address

Second Street

Zip

77 Second Street

Somerville

NJ

08876

Somerville Director Name

NJ

Street Address

Director Name

State

Class/Series

Zip

Street Address

City

State

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

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

AUTHORIZED SHARES Number of Shares

Par Value

ISSUITED SHARES Number of Shares Class/Series

Por Value

500

Common

\$1.00

500

Common

\$1.00

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

-	-11	-	
	.IL	. 2=	u

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.

7-15-02

Date

Signature of Officer

Robert Kiernan, President

Print or Type Name of Officer

Title of Officer **\$ 3**

Form 640 12/01

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

PTIANT READ INSTRUCTIONS
INSTRUCTIONS

(FORM MUST BE TYPED IN B					
I. Corporate ID No.	2. Name of Corpora				
96915 3. Street Address Principal Busine	BOWEN OIL ss Office	, INC.	City	State	Zip
120 Danforth S		5. State of Incorpor	Rehoboth	MA	02769 6. SIC Cude
508-252-8083 7. Brief Description of the Charac	ter of Business Conducted	MASSACHUS In Rhode Island	ETTS		3558
oil delivery					
8. NAMES AND ADDRE President Name	ESSES OF THE OFF	ICERS (*X* BOX FOR A	TFACHMENT) FILL IN SPACE Vice President Name	S BEFORE USING ATTA	CHMENTS
Paul Bowen			Paul Bowen Street Address		
120 Danforth S	treet		120 Danforth S	St	
City	State	Zip	City	State	Zip
Rehoboth	MA	02769	. Rehoboth Treasurer Name	MA	02769
Paul Bowen Street Address			Paul Bowen Street Address		
t120 Danforth	Street		120 Danforth	Street	
Rehoboth	State MA	02769	<i>City</i> Rehoboth	State MA	^{zıp} 02769
9. NAMES AND ADDRI Director Name	ESSES OF THE DIR	ECTORS ("X" BOX FO	R ATTACHMENT) FILL IN SPA	CES BEFORE USING AT	TACHMENTS
none			Street Address		
 City	State	Zip	City	State	Zip
Director Name		· •••	Director Name		
Street Address			Street Address		
City	, State	Zip	City	State	Zip
10. SHARES AUTHORIZ	LED ("X" BOX FOR ATI	(ACHMENT)	11. SHARES ISSUED	("X" BOX FOR ATTACHME	NT)
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
500 COMM \$1.00	PAR VALUE		500	common	\$1.00 pv

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



FOR SECRETARY OF STATE USE ONLY

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

-Signature of Officer Date

Paul Bowen
Print or Type Name of Officer

President. Title of Officer



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

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

STOP PLEASE READ

1. Carporate ID No.	CK)			_	
96915	2. Name of Corpora BOWEN OII				
3. Street Address Principal Business (Office		City	State	Zip
120 Danforth Stre 4. Business Phone No.	t	5. State of Incorpore		MA	02769 6. SIC Code
08-252-6218 7. Brief Description of the Character of Business Conducted in Rhode Island			USETTS		3558
il Delivery					
8. NAMES AND ADDRESS President Name	SES OF THE OFFI	CERS ("X" BOX FOR A	TTACHMENT) FILL IN SPACE Vice President Name	S BEFORE USING ATTAC	CHMENTS
Paul E. Bowen Street Address		•	Paul E. Bowen		<u> </u>
120 Danforth St			120 Danforth St	_	
City	State	Zip	. City	State	Zip
Rehoboth	MA	02769	Rehoboth Treasurer Name	MA	02769
Paul E. Bowen Street Address			Paul E. Bowen		-
.20 Danforth St			. 120 Danfort	h St	
City	State	Zip	City	State	ZIp
Director Name	MA SES OF THE DIR	02769 ECTORS (*x* BOX FOI	Rehoboth RATTACHMENT) (FILL IN SPACE Director Name none	MA CES BEFORE USING ATT	02769 ACHMENTS
Paul E. Bowen		•	•		· ·
Street Address 120 Danforth St	State	. Zip	Street Address	State	ī Zip
	State MA	zip 02769	•	* State	¹ zip
Street Address 120 Danforth St City Rehoboth Director Name none		·	Street Address	······································	¹ Zip
Street Address 120 Danforth St City Rehoboth Director Name		·	Street Address : City Director Name none	······································	ī zip - —
Street Address 120 Danforth St City Rehoboth Director Name none Street Address	MA	02769 Zip	Street Address : City Director Name none Street Address	······································	Zip
Street Address 120 Danforth St City Rehoboth Director Name none Street Address City 10. SHARES AUTHORIZEI	MA	02769 Zip	Street Address City Director Name none Street Address City 11. SHARES ISSUED	State	Zip

	* 9 6 9 1 5 *			
File Date:	04-07-99			
Check No.:	3044			
8y:	at a			
FOR SECRETARY	OF STATE USE ONLY			

Officer penalty of perjury, I deciate	and amini that I have examined
this report, including any accompa	nying schedules and statements, and
that all statements contained herei	n are true and correct.
1 30 E (3)	3/9/99
Sanature of Officer	Date
Print or Type Name of Officer	
President	

Title of Officer

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



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.

Number of Shares

500 COMM \$1.00 PAR VALUE

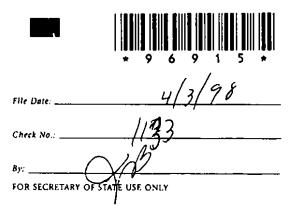
2. Name of Corporation DOWER OIL INC

96915 3. Street Address Principal Business	Office BOWEN CIL,	INC.	City	State	Zip	
120 DANFOR	•		REHOBOTH	MA	02769	
4 Lusiness Phone No		S. State of Incorporation			6. SIC Code	
1-508-252	-6218	MASSACHUS			3558	
7. Brief Description of the Characte	r of Business Conducted in		E119 .	•	2230	
OIL DELIVER		:				
8. NAMES AND ADDRES	(CERS ("X" BOX FOR ATT	ACHMENT)			
President Name			Vice President Name		•	
PAUL E. BOWEN			PAUL E. BO	WEN		
Street Address			Street Address			
120 Da	anforth Str	eet	120 Danf	orth Street		
Clly	State	Zip	City	State	Zip	
REHOBOTH	MA	02769	REHOBOTH	MA	02769	
Secretary Name	***		Treasurer Name	•••••	• • •	-
PAUL E. BOY	WEN		PAUL E. BOWEN			
Street Address			Street Address			
120 Danfor	th Street		120 Danfort	h Street		
City	State	Zip	City	State	Zip	
Rehoboth	MA	02769	Rehoboth	MA	02769	
9. NAMES AND ADDRES	SES OF THE DIRE	CTORS ("X" BOX FOR A	TTACHMENT)	•		
Director Name			Director Name			
PAUL E. BOY	NEN					
Street Address			Street Address		·	
120 Danfor	th Street					
City	State	Zip	City	State	ZIp	
REHOBOTH	MA	02769				
Director Name			Director Name			
6.						
Street Address			Street Address			
City	State	Zip	City	State	Zip	
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)		11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)				
AUTHORIZZE) SHARES			ISSLIFT) SHARPS			

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

Number of Shares

1000 SHS



Class/Series

Par Value

\$1.00

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.

Class/Series

common

Par Value

\$1.00 Par V.