



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Matthew A. Brown, Secretary of State

Corporations Division
100 North Main Street
Providence, RI 02903-1335
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

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

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 67316		2. Name of Corporation SRU Inc.			
3. Street Address Principal Business Office 141 Industrial Highway			City Slatersville	State RI	Zip 02876
4. Business Phone No. (401) 762-1400		5. State of Incorporation RHODE ISLAND			6. SIC Code 7245
7. Brief Description of the Character of Business Conducted in Rhode Island TO PROVIDE CONSULTATION SERVICES; TO BUY, SELL, LEASE, USE& SERVICE,ETC. MACHINES, EQUIPMENT, GOODS, WARES, ETC.					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name William P. Sibilias			Vice President Name David V. MacDonald		
Street Address 57 Pond House Road			Street Address 40 Hilltop Road		
City North Smithfield	State RI	Zip 02876	City Lancaster	State MA	Zip 01523
Secretary Name David V. MacDonald			Treasurer Name William P. Sibilias		
Street Address 40 Hilltop Road			Street Address 57 Pond House Road		
City Lancaster	State MA	Zip 01523	City North Smithfield	State RI	Zip 02876
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name William P. Sibilias			Director Name David V. MacDonald		
Street Address 57 Pond House Road			Street Address 40 Hilltop Road		
City North Smithfield	State RI	Zip 02876	City Lancaster	State MA	Zip 01523
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1,000 NO PAR VALUE			200 shares	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	2992
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.

Signature of Officer
William P. Sibilias

Print or Type Name of Officer

President

Title of Officer

Date
8/15/05



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Matthew A. Brown, Secretary of State

Corporations Division
100 North Main Street
Providence, RI 02903-1335
401.222.3040

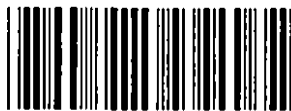
PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

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

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 67316		2. Name of Corporation SRU Inc.		
3. Street Address Principal Business Office 141 Industrial Highway		City Slatersville	State RI	Zip 02876
4. Business Phone No. (401) 762-1400		5. State of Incorporation RHODE ISLAND		6. SIC Code 7245
7. Brief Description of the Character of Business Conducted in Rhode Island TO PROVIDE CONSULTATION SERVICES; TO BUY, SELL, LEASE, USE& SERVICE,ETC. MACHINES, EQUIPMENT, GOODS, WARES, ETC.				
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
President Name William P. Sibilis		Vice President Name David V. MacDonald		
Street Address 57 Pond House Road		Street Address 40 Hilltop Road		
Secretary Name David V. MacDonald		Treasurer Name William P. Sibilis		
Street Address 40 Hilltop Road		Street Address 57 Pond House Road		
City Lancaster	State MA	Zip 01523	City North Smithfield	State RI
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			Zip 02876	
Director Name William P. Sibilis		Director Name David V. MacDonald		
Street Address 57 Pond House Road		Street Address 40 Hilltop Road		
City North Smithfield	State RI	Zip 02876	City Lancaster	State MA
Director Name			Zip 01523	
Street Address		Street Address		
City	State	Zip	City	State
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES		ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series
1,000 NO PAR VALUE			200 shares	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 1-28-04
Check No. 0483
By: ICP

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

William P. Sibilis

Print or Type Name of Officer

President

Title of Officer

1/26/04

Date



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

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 2003

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

67316 SRU Inc.

3. Street Address Principal Business Office

141 Industrial Highway

4. Business Phone No.

(401) 762-1400

5. State of Incorporation

RHODE ISLAND

City

Slatersville

State

RI

Zip

02876

6. SIC Code

7245

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

To provide consulting service including mfg. operations, construction and store design.

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

President Name

William P. Sibilia

Street Address

57 Pond House Road

City

No. Smithfield

State

RI

Zip

02876

Secretary Name

David V. MacDonald

Street Address

40 Hilltop Road

City

Lancaster

State

MA

Zip

01523

Vice President Name

David V. MacDonald

Street Address

40 Hilltop Road

City

Lancaster

State

MA

Zip

01523

Treasurer Name

William P. Sibilia

Street Address

57 Pond House Road

City

No. Smithfield

State

RI

Zip

02876

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

Director Name

William P. Sibilia

Street Address

57 Pond House Road

City

No. Smithfield

State

RI

Zip

02876

Director Name

David V. MacDonald

Street Address

40 Hilltop Road

City

Lancaster

State

MA

Zip

01523

Director Name

Street Address

City

State

Zip

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 shares

Common

No Par Value

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



* 6 7 3 1 6 *

File Date: 2.21.03

Check No.: 1432

By: IUP

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

2/18/03

William P. Sibilia

Print or Type Name of Officer

President

Title of Officer

5

Form 630 12/02



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

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)

1. Corporate ID No. 2. Name of Corporation

67316

SRU Inc.

3. Street Address Principal Business Office

141 Industrial Highway

City

Slatersville

State

RI

Zip

02876

4. Business Phone No.

(401) 762-1400

5. State of Incorporation

RHODE ISLAND

6. SIC Code

7245

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

To provide consulting service including mfg. operations, construction and store design.

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

President Name

William P. Sibilis

Vice President Name

David V. MacDonald

Street Address

57 Pond House Road

Street Address

40 Hilltop Road

City

No. Smithfield

State

RI

Zip

02876

City

Lancaster

State

MA

Zip

01523

Secretary Name

David V. MacDonald

Treasurer Name

William P. Sibilis

Street Address

40 Hilltop Road

Street Address

57 Pond House Road

City

Lancaster

State

MA

Zip

City

No. Smithfield

State

RI

Zip

02876

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

Director Name

William P. Sibilis

Director Name

David V. MacDonald

Street Address

57 Pond House Road

Street Address

40 Hilltop Road

City

No. Smithfield

State

RI

Zip

02876

City

Lancaster

State

MA

Zip

01523

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

1,000 NO PAR VALUE

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

ISSUED SHARES

Number of Shares

Class/Series

Par Value

200 shares

Common

no par value

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



* 6 7 3 1 6 *

File Date: 2-8-02

Check No.: 506

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] 2/6/02
Signature of Officer Date

William P. Sibilis

Print or Type Name of Officer

President

Title of Officer

3

Form 630 12/01



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the 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)

1. Corporate ID No. 2. Name of Corporation

67316

SRU Inc.

3. Street Address Principal Business Office

141 Industrial Highway

City

Slatersville

State

RI

Zip

02876

4. Business Phone No.

(401) 762-1400

5. State of Incorporation

RHODE ISLAND

6. SIC Code

7245

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

To provide consulting service including mfg. operations, construction and store design.

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

President Name

William P. Sibilis

Street Address

57 Pond House Road

City

State

Zip

No. Smithfield

RI

02876

Secretary Name

David V. MacDonald

Street Address

40 Hilltop Road

City

State

Zip

Lancaster

MA

01523

Vice President Name

David V. MacDonald

Street Address

40 Hilltop Road

City

State

Zip

Lancaster

MA

01523

Treasurer Name

William P. Sibilis

Street Address

57 Pond House Road

City

State

Zip

No. Smithfield

RI

02876

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

Director Name

William P. Sibilis

Street Address

57 Pond House Road

City

State

Zip

No. Smithfield

RI

02876

Director Name

Director Name

David V. MacDonald

Street Address

40 Hilltop Road

City

State

Zip

Lancaster

MA

01523

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

1,000 SHS NO PAR VALUE

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

ISSUED SHARES

Number of Shares

Class/Series

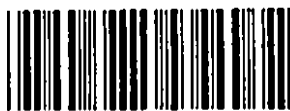
Par Value

200 shares

Common

no par value

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



* 6 7 3 1 6 *

File Date: 3-13-01

Check No.: 516

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: 3/12/01

William P. Sibilis

Print or Type Name of Officer

President

Title of Officer

Filing Fee: \$50.00

To be filed annually between
September 1 and November 1



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Corporations Division
100 North Main Street Providence, Rhode Island 02903-1335
Telephone (401) 222-3040

LIMITED LIABILITY COMPANY

ID Number DLLC 101774

Annual Report for the year 2000

1. The name of the limited liability company is:

SRU HOLDINGS, LLC

2. The address of the principal office of the limited liability company is:

Ochre Court, 100 Ochre Point Avenue, Newport, RI 02840

3. The state or other jurisdiction under the laws of which it is formed is RHODE ISLAND

4. The name and address of its resident agent is: ADLER POLLOCK & SHEEHAN

ATTN: JOSEPH R. DISTEFANO 2300 BANKBOSTON PLAZA PROVIDENCE RI 02903

5. The current mailing address of the limited liability company and the name or title of a person to whom communications may be directed are: Attn: Office of the President, Ochre Court, 100 Ochre

Point Avenue, Newport, RI 02840

6. A brief statement of the character of the business in which the limited liability company is actually engaged in this state: owner of real estate

7. If the limited liability company has managers, the name and address of each manager of the limited liability company

Name

Address

N/A

Dated

9/6/00



1 0 1 7 7 4

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.

SRU Holdings, LLC

Exact Name of Limited Liability Company

By

[Signature]

Title

FOR SECRETARY OF STATE USE ONLY

File Date: 9-17-00

Check No.: 68825

By:

BMF

Form No. 632
Revised 01/99



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



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. 2. Name of Corporation

67316

SRU, Inc.

3. Street Address Principal Business Office

141 Industrial Highway

City

No. Smithfield

State

RI

Zip

02876

4. Business Phone No.

(401) 762-1400

5. State of Incorporation

Rhode Island

6. SIC Code

7245

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

To provide consulting service including mfg. operations, construction and store design.

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

President Name

William P. Sibilias

Street Address

57 Pond House Road

City

No. Smithfield

State

RI

Zip

02876

Secretary Name

David V. MacDonald

Street Address

100 Mt. Vernon Street

City

Fitchburg

State

MA

Zip

04140

Vice President Name

David V. MacDonald

Street Address

100 Mt. Vernon Street

City

Fitchburg

State

MA

Zip

01420

Treasurer Name

William P. Sibilias

Street Address

57 Pond House Road

City

No. Smithfield

State

RI

Zip

02876

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

Director Name

William P. Sibilias

Street Address

57 Pond House Road

City

No. Smithfield

State

RI

Zip

02876

Director Name

Roland Desmarais

Street Address

32 Edmund Street

City

Woonsocket

State

RI

Zip

02895

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

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

1000 SHS NO PAR VALUE

Director Name

David V. MacDonald

Street Address

100 Mt. Vernon Street

City

Fitchburg

State

MA

Zip

01420

Director Name

Street Address

City

State

Zip

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

ISSUED SHARES

Number of Shares

Class/Series

Par Value

200 shares

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: Feb 23, 1999

Check No.: 620

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] 2/2/99
Signature of Officer Date

William P. Sibilias
Print or Type Name of Officer

President
Title of Officer



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



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. **67316** 2. Name of Corporation **Stores R Us, Inc.**

3. Street Address Principal Business Office
141 Industrial Highway
City **No. Smithfield** State **RI** Zip **02876**
4. Business Phone No. **(401) 762-1400** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **7245**

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

To provide consulting service including mfg., operations, construction, and store design.

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

President Name

William P. Sibilila

Street Address

57 Pond House Road

City **No. Smithfield** State **RI** Zip **02876**

Secretary Name

David V. MacDonald

Street Address

100 Mt. Vernon Street

City **Fitchburg** State **MA** Zip **04140**

Vice President Name

David V. MacDonald

Street Address

100 Mt. Vernon Street

City **Fitchburg** State **MA** Zip **01420**

Treasurer Name

William P. Sibilila

Street Address

57 Pond House Road

City **No. Smithfield** State **RI** Zip **02876**

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

Director Name

William P. Sibilila

Street Address

57 Pond House Road

City **No. Smithfield** State **RI** Zip **02876**

Director Name

Roland Desmarais

Street Address

32 Edmund Street

City **Woonsocket** State **RI** Zip **02895**

Director Name

David V. MacDonald

Street Address

100 Mt. Vernon Street

City **Fitchburg** State **MA** Zip **01420**

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 SHS 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



* 6 7 3 1 6 *

File Date: **3/2**

Check No.: **5529**

By: **WPS**

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 **William P. Sibilila** Date **2/26/98**

Print or Type Name of Officer **William P. Sibilila**

Title of Officer **President**



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



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. **67316** 2. Name of Corporation **Stores R Us, Inc.**

3. Street Address Principal Business Office
141 Industrial Hwy.

City State
No. Smithfield RI

Zip
02876

4. Business Phone No.
(401) 762-1400

5. State of Incorporation
RHODE ISLAND

6. SIC Code
7245

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

To provide consulting service including mfg., operations, construction, and store design.

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

President Name
William P. Sibilis

Vice President Name
David V. MacDonald

Street Address
57 Pond House Road
City State Zip
No. Smithfield RI 02876

Street Address
100 Mt. Vernon Street
City State Zip
Fitchburg MA 01420

Secretary Name
David V. MacDonald
Street Address
100 Mt. Vernon Street
City State Zip
Fitchburg MA 01420

Treasurer Name
William P. Sibilis
Street Address
57 Pond House Road
City State Zip
No. Smithfield RI 02876

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

Director Name
William P. Sibilis
Street Address
57 Pond House Road
City State Zip
No. Smithfield RI 02876

Director Name
David V. MacDonald
Street Address
100 Mt. Vernon Street
City State Zip
Fitchburg MA 01420

Director Name
Michelle A. Mulloy
Street Address
44 Circledale Road
City State Zip
Cumberland RI 02864

Director Name
Roland Desmarais
Street Address
32 Edmund Street
City State Zip
Woonsocket RI 02895

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

AUTHORIZED SHARES

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

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



* 6 7 3 1 6 *

File Date: **3.4.97**

Check No.: **497**

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] **3/25/97**
Signature of Officer Date

William P. Sibilis

Print or Type Name of Officer

President

Title of Officer

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: Sep. 1 - Nov. 1
CORP: Jan. 1 - March 1

Corporate ID: 0067516 Annual Report for the year: 1994

Name of Business Entity: Stores R Us, Inc.

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

Federal Taxpayer Identification Number: [REDACTED]

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)

11 Marigold Circle

No. Providence, RI 02904

Phone: (401) 353-0040

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:

c/o Attorney Jill S. Votta

900 Smith Street

Providence, RI 02908

Brief statement of the character of business conducted in Rhode Island
To provide consulting service including mfg.,
operations, construction and store design

Date of Organization: March 12, 1992

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>William P. Sibilis</u>	<u>11 Marigold Circle, No. Providence, RI 02904</u>		
<input type="checkbox"/> CHIEF OPERATING OFFICER OR <input checked="" type="checkbox"/> VICE PRESIDENT (Check one) <u>David V. MacDonald</u>	<u>100 Mt. Vernon Street, St. Fitchburg, MA</u>		
<input type="checkbox"/> CUSTODIAN OF RECORDS OR <input checked="" type="checkbox"/> SECRETARY (Check one) <u>William P. Sibilis</u>	<u>11 Marigold Circle, No. Providence, RI 02904</u>		
<input type="checkbox"/> CHIEF FINANCIAL OFFICER OR <input checked="" type="checkbox"/> TREASURER (Check one) <u>William P. Sibilis</u>	<u>11 Marigold Circle, No. Providence, RI 02904</u>		

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE

NUMBER OF SHARES AUTHORIZED (If Applicable)

NUMBER 1,000 shares

CLASS Common

SERIES

PAR VALUE OR WITHOUT PAR No Par Value

NUMBER OF SHARES ISSUED AND OUTSTANDING (If Applicable)

NUMBER 200 shares

CLASS Common

SERIES

PAR VALUE OR WITHOUT PAR No Par Value

Date January 27, 19 94

By: Stores R Us, Inc.

[Signature]
President

TITLE OF OFFICER SIGNING

Form 31 1-94

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

JILL S. VOTTA
900 SMITH STREET
PROVIDENCE RI 02908

Filing Fee \$50.00

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 0067316 Annual Report for the year 1993

FIRST: The name of the corporation is Stores R' Us, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is Excellant

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 11 Marigold Circle, North Providence 02904

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

Name

Office

Address (including number, street, zip code)

Director

Director

Director

William P. Sibilia President 11 Marigold Circle, North Providence

David V. MacDonald Vice President 100 Mt. Vernon St. Fitchburg, Ma

Betty A. MacDonald Secretary 100 Mt. Vernon Street, Fitchburg, Ma

Cheryl A. Sibilia Treasurer 11 Marigold Circle, North Providence

SEVENTH: Number of Shares authorized:

No. of Shares

Class

Series

Par Value
or statement that
shares are without
par value

1000

No Par Value

EIGHTH: Number of Shares issued:

No. of Shares

Class

Series

Par Value
or statement that
shares are without
par value

Dated February 24, 19 93

Stores R Us Inc.
(Name of Corporation)

By William P. Sibilia

AMT #29
124

FEB 23 1993

[Handwritten signature]