



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. 101817 | | 2. Name of Corporation BRUSH BUSTERS PAINTING, INC. | | | |
| 3. Street Address Principal Business Office 61 Uphill Ave. | | City Warwick | | State RI | Zip 02886 |
| 4. Business Phone No. 401-737-8882 | | 5. State of Incorporation RHODE ISLAND | | | 6. SIC Code 257 |
| 7. Brief Description of the Character of Business Conducted in Rhode Island TO PROVIDE PAINTING AND WALL HANGING SERVICES. | | | | | |
| 8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS | | | | | |
| President Name STEVEN A. CHEARINO | | | Vice President Name STEVEN H. CHEARINO | | |
| Street Address 61 Uphill Ave | | | Street Address Same | | |
| City Warwick | State RI | Zip 02886 | City | State | Zip |
| Secretary Name STEVEN A. CHEARINO | | | Treasurer Name STEVEN H. CHEARINO | | |
| Street Address Same | | | Street Address Same | | |
| City | State | Zip | City | State | Zip |
| 9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS | | | | | |
| Director Name None | | | Director Name None | | |
| Street Address | | | Street Address | | |
| City | State | Zip | City | State | Zip |
| Director Name None | | | Director Name None | | |
| 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 |
| 100 NO PAR VALUE | | | n/a | | |

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



| | |
|---------------------------------|--------|
| File Date | 2-7-05 |
| Check No. | 1785 |
| By | KM |
| 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
STEVEN H. CHEARINO
Date
President
Title of Officer



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. 101817 | | 2. Name of Corporation BRUSH BUSTERS PAINTING, INC. | | | |
| 3. Street Address Principal Business Office 61 Uphill Avenue | | City Warwick | | State RI | Zip 02886 |
| 4. Business Phone No. (401) 737-8882 | | 5. State of Incorporation RHODE ISLAND | | | 6. SIC Code 257 |
| 7. Brief Description of the Character of Business Conducted in Rhode Island TO PROVIDE PAINTING AND WALL HANGING SERVICES. | | | | | |
| 8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS | | | | | |
| President Name STEVEN A. CHEARINO | | | Vice President Name STEVEN A. CHEARINO | | |
| Street Address 61 Uphill Ave | | | Street Address Same | | |
| City Warwick | State RI | Zip 02886 | City | State | Zip |
| Secretary Name STEVEN A. CHEARINO | | | Treasurer Name STEVEN A. CHEARINO | | |
| Street Address Same | | | Street Address Same | | |
| City | State | Zip | City | State | Zip |
| 9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS | | | | | |
| Director Name None | | | Director Name None | | |
| Street Address | | | Street Address | | |
| City | State | Zip | City | State | Zip |
| Director Name None | | | Director Name None | | |
| Street Address | | | Street Address | | |
| City | State | Zip | City | State | Zip |
| 10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> AUTHORIZED SHARES | | | 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> ISSUED SHARES | | |
| Number of Shares | Class/Series | Par Value | Number of Shares | Class/Series | Par Value |
| 100 NO PAR VALUE | | | n/a | | |

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



* 1 0 1 8 1 7 *

File Date 2-2-04
Check No. 1080
By: 100

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.

STEVEN A. CHEARINO 1/14/04
Signature of Officer Date
STEVEN A. CHEARINO
Print or Type Name of Officer
President
Title of Officer



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

101817

BRUSH BUSTERS PAINTING, INC.

3. Street Address Principal Business Office

61 Uphill Ave.

City

Warwick

State

RI

Zip

02886

4. Business Phone No.

(401) 737-8882

5. State of Incorporation

RHODE ISLAND

6. SIC Code

257

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

Painting + Wallpapering

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

FILL IN SPACES BEFORE USING ATTACHMENTS

President Name

Steven A. Chearino

Vice President Name

Steven A. Chearino

Street Address

61 Uphill Ave.

Street Address

Same

City

Warwick

State

RI

Zip

02886

City

State

Zip

Secretary Name

Steven A. Chearino

Treasurer Name

Steven A. Chearino

Street Address

Same

Street Address

Same

City

State

Zip

City

State

Zip

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

FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

None

Director Name

None

Street Address

Street Address

City

State

Zip

City

State

Zip

Director Name

None

Director Name

None

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

100 NO PAR VALUE

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

ISSUED SHARES

Number of Shares

Class/Series

Par Value

NONE

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



* 1 0 1 8 1 7 *

File Date:

3.12.03

Check No.:

1593

By:

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.

Signature of Officer Steven A. Chearino Date 3/10/03

Print or Type Name of Officer STEVEN A. Chearino

Title of Officer President

5



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. 101817 2. Name of Corporation BRUSH BUSTERS PAINTING, INC.

3. Street Address Principal Business Office 61 Uphill Ave. City Warwick State RI Zip 02886
4. Business Phone No. (401) 737-8882 5. State of Incorporation RHODE ISLAND 6. SIC Code 257

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

Painting & Wallpapering

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

| | |
|---|--|
| President Name <u>Steven A. Chearino</u> | Vice President Name <u>STEVEN A. Chearino</u> |
| Street Address <u>61 Uphill Ave</u> | Street Address <u>Same</u> |
| City <u>Warwick</u> State <u>RI</u> Zip <u>02886</u> | City <u>Same</u> State <u>RI</u> Zip <u>02886</u> |
| Secretary Name <u>Steven A. Chearino</u> | Treasurer Name <u>Steven A. Chearino</u> |
| Street Address <u>Same</u> | Street Address <u>Same</u> |
| City <u>Warwick</u> State <u>RI</u> Zip <u>02886</u> | City <u>Same</u> State <u>RI</u> Zip <u>02886</u> |

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

| | |
|---|---|
| Director Name <u>None</u> | Director Name <u>None</u> |
| Street Address <u>None</u> | Street Address <u>None</u> |
| City <u>None</u> State <u>None</u> Zip <u>None</u> | City <u>None</u> State <u>None</u> Zip <u>None</u> |
| Director Name <u>None</u> | Director Name <u>None</u> |
| Street Address <u>None</u> | Street Address <u>None</u> |
| City <u>None</u> State <u>None</u> Zip <u>None</u> | City <u>None</u> State <u>None</u> Zip <u>None</u> |

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

AUTHORIZED SHARES
Number of Shares Class/Series Par Value
100 NO PAR VALUE

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

ISSUED SHARES
Number of Shares Class/Series Par Value
n/a

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



* 1 0 1 8 1 7 *

File Date: 2-22-02
Check No.: 1476
By: Km

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 2/19/02
Print or Type Name of Officer Steven A. Chearino
Title of Officer President

Title of Officer
5



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. 101817 2. Name of Corporation BRUSH BUSTERS PAINTING, INC.

3. Street Address Principal Business Office 61 Uphill Ave. City Warwick State RI Zip 02886
4. Business Phone No. (401) 737-8882 5. State of Incorporation RHODE ISLAND 6. SIC Code 257

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

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

| | |
|--|---|
| President Name <u>Steven H. Chearino</u> Street Address <u>61 Uphill Ave.</u> City <u>Warwick</u> State <u>RI</u> Zip <u>02886</u> Secretary Name <u>Steven A. Chearino</u> Street Address <u>Same</u> City <u>Warwick</u> State <u>RI</u> Zip <u>02886</u> | Vice President Name <u>Steven A. Chearino</u> Street Address <u>Same</u> City <u>Warwick</u> State <u>RI</u> Zip <u>02886</u> Treasurer Name <u>Steven A. Chearino</u> Street Address <u>Same</u> City <u>Warwick</u> State <u>RI</u> Zip <u>02886</u> |
|--|---|

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

| | |
|--|--|
| Director Name <u>None</u> Street Address <u>None</u> City <u>None</u> State <u>None</u> Zip <u>None</u> Director Name <u>None</u> Street Address <u>None</u> City <u>None</u> State <u>None</u> Zip <u>None</u> | Director Name <u>None</u> Street Address <u>None</u> City <u>None</u> State <u>None</u> Zip <u>None</u> Director Name <u>None</u> Street Address <u>None</u> City <u>None</u> State <u>None</u> Zip <u>None</u> |
|--|--|

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

AUTHORIZED SHARES
Number of Shares Class/Series Par Value
100 NO PAR VALUE

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

ISSUED SHARES
Number of Shares Class/Series Par Value
11/a

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



* 1 0 1 8 1 7 *

File Date: 1/8
Check No.: 1332
By: SC

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 Steven A. Chearino Date 1/6/01
Print or Type Name of Officer Steven A. Chearino
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
401-222-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **101817** 2. Name of Corporation **BRUSH BUSTERS PAINTING, INC.**

3. Street Address Principal Business Office **61 Uphill Ave.** City **Warwick** State **RI** Zip **02886**
4. Business Phone No. **(401) 737-8882** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **257**

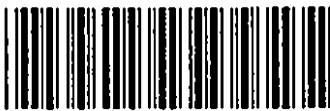
7. Brief Description of the Character of Business Conducted in Rhode Island **Painting**

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) **FILL IN SPACES BEFORE USING ATTACHMENTS**
President Name **Steven A. Chearino** Vice President Name **Steven A. Chearino**
Street Address **61 Uphill Ave** Street Address **Same**
City **Warwick** State **RI** Zip **02886** City **Same** State **RI** Zip **02886**
Secretary Name **Steven A. Chearino** Treasurer Name **Steven A. Chearino**
Street Address **Same** Street Address **Same**
City **Same** State **RI** Zip **02886** City **Same** State **RI** Zip **02886**

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) **FILL IN SPACES BEFORE USING ATTACHMENTS**
Director Name **None** Director Name **None**
Street Address **None** Street Address **None**
City **None** State **None** Zip **None** City **None** State **None** Zip **None**
Director Name **None** Director Name **None**
Street Address **None** Street Address **None**
City **None** State **None** Zip **None** City **None** State **None** Zip **None**

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT) 11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)
AUTHORIZED SHARES ISSUED SHARES
Number of Shares Class/Series Par Value Number of Shares Class/Series Par Value
100 NO PAR VALUE **n/a**

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



* 1 0 1 8 1 7 *

File Date: **3/28/00**
Check No.: **1240**
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 **3/28/00**
Print or Type Name of Officer **Steven A. Chearino**
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
401-222-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1999

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 101817 2. Name of Corporation BRUSH BUSTERS PAINTING, INC.

3. Street Address Principal Business Office
61 Uphill Ave City Warwick State RI Zip 02886
4. Business Phone No. (401) 737-8882 5. State of Incorporation RHODE ISLAND
6. SIC Code 0257

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

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

| | |
|---|---|
| President Name <u>STEVEN A. CHEARINO</u> | Vice President Name <u>STEVEN A. CHEARINO</u> |
| Street Address <u>61 Uphill Ave.</u> | Street Address <u>61 Uphill Ave.</u> |
| City <u>Warwick</u> State <u>RI</u> Zip <u>02886</u> | City <u>Warwick</u> State <u>RI</u> Zip <u>02886</u> |
| Secretary Name <u>STEVEN A. CHEARINO</u> | Treasurer Name <u>STEVEN A. CHEARINO</u> |
| Street Address <u>61 Uphill Ave.</u> | Street Address <u>61 Uphill Ave.</u> |
| City <u>Warwick</u> State <u>RI</u> Zip <u>02886</u> | City <u>Warwick</u> State <u>RI</u> Zip <u>02886</u> |

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

| | |
|------------------------------|------------------------------|
| Director Name <u>None</u> | Director Name <u>None</u> |
| Street Address | Street Address |
| City | City |
| State | State |
| Zip | Zip |
| Director Name <u>None</u> | Director Name <u>None</u> |
| 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
100 NO PAR VALUE

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

ISSUED SHARES
Number of Shares Class/Series Par Value
None

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



* 1 0 1 8 1 7 *

File Date: 1-8-99
Check No.: 1082
By: AMF 100

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.

Steven A. Chearino 1/6/99
Signature of Officer Date
STEVEN A. CHEARINO
Print or Type Name of Officer
President
Title of Officer