

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	I - March I •	Filing Fee: \$50.00				
(FORM MUST BE TYPED I						
1. Corporate ID No.	2. Name of Car					
19716		HEMICAL COMPANY				
3. Street Address Principal Bi	usiness Office		City	State	Zip	
P.O. BOx 6422			Providence	RI	02940	
4. Business Phone No.	,	5. State of Incorpor	ation	<del></del>	6. SIC Code	
(401) 521-7474		RHODE ISLA	AND		1883	
7. Brief Description of the Ch MANUPACTURING AND	naracter of Business C SELLING INDU	Conducted in Rhode Island STRIAL AND TEXTILE	MERCHANDISE AND CHEM	ICALS.	· · · · · · · · · · · · · · · · · · ·	
8. NAMES AND ADDRI	ESSES OF THE O	FFICERS ("X" BOX FOI	RATTACHMENT)   FILL IN SI	PACES BEFORE USING AT	TACHMENTS	
President Name			Vice President Name	•	•	
Barry Shepard Sirvei Address			· Adam D. Shepar	<u>a</u>		
			Street Address			
P.O. Box 6422			P.O. Box 6422			
City	State	Zip	City	State	Zip	
Providence	RI	02940	· Providence	RI	02940	
Secretary Name			Treasurer Name			
Barry Shepard			Barry Shepard	<del></del>		
Street Address			* Sircei Address			
as above	· · · · · · · · · · · · · · · · · · ·	T	.as above			
City	State	Zip	City	State	Zip	
;=: <u>=</u> :	}		<del></del>			
9. NAMES AND ADDRI	ESSES OF THE D	IRECTORS ("X" BOX F	OR ATTACHMENT) 🔲 FILL IN	SPACES BEFORE USING A	TTACHMENTS	
Director Name			Director Name			
Barry Shepard			Adam D. Shepard	i		
Street Address			-Street Address			
as above			as above			
City	State	Zip	•City	State	Zip	
			•		'	
Director Name	•••••		Director Name	* * * * * * * * * * * * * * * * * * * *	• • • • • • • • • • •	
			•			
Street Address	<del></del>	··	Street Address	· · · · · · · · · · · · · · · · · · ·		
	الماد فللمحج جيات	manus ( a a	• 			
City	State	Zip	.Ciry	State	Zip	
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10. SHARES AUTHORI	ZED ("X" BOX FO	RATTACHMENT)	11. SHARES ISSUED (")	" BOX FOR ATTACHMENT	50	
AUTHORIZED SHARES			ISSUED SHARES	~ <del>- • •</del>		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value	
300 COMM NO PAR	VALUE		100	Common	No Par Value	
· · · · · · · · · · · · · · · · · · ·						
			!		<u>!</u>	
This report must be sig	ned in ink by cit	her the President, Vic	e President, Secretary, Assi.	stant Secretary, Treasur	er, Receiver or Truste	
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	611    \$   <b> </b>					
	(11)   3     1					
1 9 7	7 1 6		Under penalty of pe	rjury, I declare and affirm th	at I have examined	
				g any accompanying schedu		
7 0			and that all statemen	its contained he ein me true	and correct.	
100 A-7	'-OJ		#\^	KID.	Shot -	
File Date		<del>-</del>	1500	No X 16m	012/05	
Check No. \$5	12		Signature of Officer	Do	ne /	
CHECK HO.		<del>-</del>	<u>Ba</u> rry Shep			
Pur / M			Print or Type Name of			
By:		<b>—</b> ]	President			
FOR SECRETARY OF STATE USE ONLY			Title of Officer Form 630 12/			



Edward S. Inman, III, Secretary of State: Corporations Division 100 North Main Street, Providence, RI 02903-1335 401.222,3040

Form 630 12/01

#### PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR $\_$

Filing Period: January 1 - March 1 Filing Fee: \$50.00 (FORM MUST BE TYPED IN BLACK) 1. Corporate ID No. 2. Name of Corporation 19716 LENOX CHEMICAL COMPANY 3. Street Address Principal Business Office City State Zip P.O. Box 6422 Providence RI 02940 4. Business Phone No. 5. State of Incorporation 6. SIC Code (401) 521-7474 RHODE ISLAND 1883 7. Brief Description of the Character of Business Conducted in Rhode Island MANUFACTURING AND SELLING INDUSTRIAL AND TEXTILE MERCHANDISE AND CHEMICALS. 8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) | FILL IN SPACES BEFORE USING ATTACHMENTS President Name Vice President Name Barry Shepard · Adam D. Shepard Street Address Sireei Address P.O. Box 6422 P.O. Box 6422 City State City Zip State Providence RI Providence RI 02940 02940 Secretary Name Treasurer Name Barry Shepard Barry Shepard Street Address Street Address as above .as above 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 Director Name Barry Shepard Adam D. Shepard Street Address · Street Address as above as above State Zip State City Zip Director Name Director Name Street Address Street Address City State Zip State 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 300 COMM NO PAR VALUE No Par Value 100 Common 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 conjugated herein and true and correct. File Date Check No. Barry Shepard Print or Type Name of Officer President FOR SECRETARY OF STATE USE ONLY Title of Officer



Edward S. Inman, 111, 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	y I - March 1 🔎	Filing Fee: \$50.00				
(FORM MUST BE TYPED						
1. Corporate ID No.	2. Name of Cor				<del></del>	
19716	LENOX C	HEMICAL COMPANY				
3. Street Address Principal I	Business Office	<del></del>	City	State	Zip	
P.O. Box 6422	~		Providence	RI	02940	
4. Business Phone No.	<del></del> -	5. State of Incorpora			6. SIC Code	
(401) 521-7474		RHODE ISLAI			1883	
<b>5</b>	<del></del>		<del></del>	·		
7. Brief Description of the C MANUFACTURING AND	haracter of Business C D SELLING INDU:	onducted in Rhode Island STRIAL AND TEXTILE	MERCHANDISE AND CHEM	ICALS.		
8. NAMES AND ADDR	RESSES OF THE O	FFICERS ("X" BOX FOR	ATTACHMENT) 🔲 FILL IN SE	PACES BEFORE USING A	ITACHMENTS	
President Name		•	Vice President Name	• •		
Barry Shepard			· Adam D. Shepare	d		
Street Address			Street Address			
P.O. Box 6422			.P.O. Box 6422			
City	State	Ζιρ	City	State	Zip	
Providence	RI	02940	Providence	RI	02940	
Secretary Name			Treasurer Name	'		
Barry Shepard			Barry Shepard			
Street Address		<del></del>	Street Address	<del></del>		
as above			as above			
1	16	72-		Is.		
City	State	Zip	City	State	Zip	
	<b></b>					
9. NAMES AND ADDE	resses of the d	IRECTORS ("X"_BOX FO	<i>RATTACHMENT)</i> 🗌 FILL IN	SPACES BEFORE USING	ATTACHMENTS	
Director Name			Director Name			
Barry Shepard			Adam D. Shepare	d		
Street Address		· · ·	Street Address			
as above			'as above			
Ciry	State	Zip	•City	State	Zip	
		·     '	•		1	
Director Name	• • • • • • • •		Director Name			
1			•			
Street Address			· Street Address			
			•			
City	State	Zip	City	State	Zip	
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10. SHARES AUTHOR	CIZED ("X" BOX FO	укаласнывы) 🗍	•	X" BOX FOR ATTACHMEN	<u>~</u>	
AUTHORIZED SHARES_	Class/Series	Par Value	ISSUED SHARES	Class/Series		
Number of Shares	Ciassiseries	rar value	Number of Shares	Class/Series	Par Value	
.300 COMM NO PAR	2 \/Δ1   I   <b>E</b>		100	Common	No Par Value	
i	· VALUE			{	no rur varue	
					1	
This report must be si	iened in ink by ei	ther the President. Vice	President, Secretary, Assi	stant Secretary, Treas.	urer Receiver or Trustee	
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1 9	7 1 6		Under nenalty of ne	rjury, I declare and affirm	that I have examined	
				g any accompanying sche		
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	2/2/2		R	11 10	1	
File Date	423/13		6 Ach	You I trans	8/12/13	
	70.0		Signature of Officer	my Just	Date	
Check No.	ノカイ		Barry Shep	• •	=	
}		_	Print or Type Name of			
B <sub>Y</sub>	7-			j Ojjicer		
	ATE HEE ONLY		President			
FOR SECRETARY OF ST	ALE USE ONLY		Tule of Officer		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

Filing Period: January 1-March 1 • Filing Fee: \$50.00 (FORM MUST BE TYPED IN BLACK) 1. Corporate ID No. 2. Name of Corporation 19716 LENOX CHEMICAL COMPANY 3. Street Address Principal Business Office City State Zip 116 Printery Street Providence RI 02904 4. Business Phone No. 5. State of Incorporation 6. SIC Code 1883 **RHODE ISLAND** (401) 521-7474 7. Brief Description of the Character of Business Conducted in Rhode Island Manufacturing and selling industrial and textile merchandise and chemicals. 8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS President Name Vice President Name Barry Shepard Adam D. Shepard Street Address Street Address 116 Printery Street 116 Printery Street City Zip State ZIP RI 02904 Providence Providence RT 02904 Secretary Name Treasurer Name Barry Shepard Barry Shepard Street Address Street Address as above as above 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 Director Name Barry Shepard Adam D. Shepard Street Address Street Address as above as above City State City ZIp State Zip Director Name Director Name Street Address . Street Address. City Zip City State 210 10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ALTIHORIZED SHARES ISSUED SHARES Number of Shares Class/Series Number of Shares Class/Series Par Value 300 COMM NO PAR VALUE 100 Common No Par Value

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



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File Date:	Q.A-02	
Check No.:	7409	
Av:	2	
FOR SECRETARY O	F 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 systements contacted breggin are true and correct.

Barry Shepard Print or Type Name of Officer

President

Title of Officer r<del>a</del>∑>⊳ ১

Form 630 12/01

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

Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

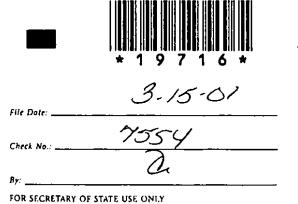
## PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001

(FORM MUST BE TYPED IN BLACK)

Corporate	ID	No.		
•		97	4	4

2. Name of Corporation
LENOX CHENICAL COMPANY 3. Street Address Principal Business Office City State 02904 Providence RΙ 116 Printery Street 4. Business Phone No. 5. State of Incorporation RHODE ISLAND (401) 521-7474 7. Brief Description of the Character of Business Conducted in Rhode Island Manufacturing and selling industrial and textile merchandise and chemicals. 8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Vice President Name Adam D. Shepard Barry Shepard Street Address Street Address 116 Printery Street 116 Printery Street City City 02904 Providence 02904 RI RI Providence Secretary Name Treasurer Name Barry Shepard Barry Shepard Street Address Street Address as above as above City Ziρ State City Zio State 9. NAMES AND ADDRESSES OF THE DIRECTORS (\*X\* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Director Name Adam D. Shepard Barry Shepard Street Address Street Address as above as above 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) 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 300 SHS NO PAR COM 100 No Par Value Common

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 statements contained herein are type and correct.

Barry Shepard 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

#### **AMENDED**

#### 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. 2. Name of Corporation Lenox Chemical Company 19716

3. Street Address Principal Business Office

35 Livingston Street //6 4. Rusiness Phone No.

Rhode Island (401) 521-7474

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

State

Street Address

City

City State Zip

RI Providence

02904 6. SIC Code 1883

Manufacturing and selling industrial and textile merchandise and chemicals.

	·· · · · ·		
NAMES AND ADD	RESSES OF THE	OFFICERS ("X" BOX	FOR ATTACHMENT

President Name

Vice President Name Adam D. Shepard

Street Address

35 Livingston Street

Providence

RI

State

02904

No Par Value

Zip

Zip

Treasurer Name Secretary Name

Barry Shepard Barry Shepard Street Address Street Address

Zip

as above 35 Livingston Street City State City

02904 RI Providence

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

Director Name **Director Name** 

Barry Shepard Adam D. Shepard Street Address Street Address

as above as above

Zip Zip City City State

Director Name Director Name

Street Address Street Address

State Zip Zip Çin City State

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

ISSUED SHARES AUTHORIZED SHARES

Number of Shares Class/Series Par Value

Par Value Number of Shares Class/Series

300 SHS NO PAR COM

100

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 segements contained herein are true and correct.

Common

Barry Shepard Print or Type Name of Officer

Treasurer Title of Officer



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

### 2000

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

(FORM MUST BE TYPED IN BLACK)

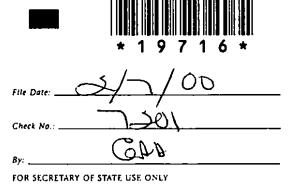
1. Corporate ID No. 19716 2. Name of Carporation

LENOX CHEMICAL COMPANY

3. Street Address Principal Busines	s Office		City	State	Zip
35 Livingston St	reet	5. State of Incorporation	Providence	RI	02904 6. SIC Code
(401) 521-7474		RHODE ISLAN	D		1883
7. Brief Description of the Charact	er of Business Conducted (	in Rhode Island			
Manufacturing an	d selling ind	ustrial and text	ile merchandise.		
8. NAMES AND ADDRE President Name	<del>-</del>			EFORE USING ATTAC	CHMENTS
Leonard Shaftin			Adam D. Shepard Street Address		
201 178th Dr.			35 Livingston St	reet	
City	State	Zip	City	State	Zip
No. Miami Secretary Name	FL	·	Providence Treasurer Name	RI	02904
Barry Shepard			Barry Shepard Street Address		
35 Livingston St	reet		as above		
City	State	Zip	City	State	Zip
Providence	RI	02904			
9. NAMES AND ADDRE Director Name	SSES OF THE DIR	ECTORS ("X" BOX FOR AT	TACHMENT) FILL IN SPACE Director Name	S BEFORE USING ATT	ACHMENTS
Adam D. Shepard	,		Barry Shepard Street Address		
as above			as above		
City	State	Zip	City	State	Zip
, Director Name		• • •	Director Name		
Leonard Shaftin Street Address			. Street Address		
as above					
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZ authorizzd shares	ED (*x* box for att	TACHMENT)	11. SHARES ISSUED (*.	X" BOX FOR ATTACHMEN	T)
Number of Charge	Class/Series	Par Value	Number of Shares	Class/Series	Par Value

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

100



300 SHS NO PAR COM

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

Common

Signature of Officer

Barry Shepard
Print or Type Name of Officer

Treasurer

Title of Officer



No Par Value

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

#### **AMENDED**

#### 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

19716

Lenox Chemical Company

3. Street Address Principal Business Office

City

State

Zip

35 Livingston Street 1/6 PRINTERY
4. Business Phone No. S. Stat

Providence

RI

02904 6. SIC Code

(401) 521-7474

RHODE ISLAND

1883

02904

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

State

State

Manufacturing and selling industrial and textile merchandise and chemicals.

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

President Name

Street Address

City

Vice President Name

Adam D. Shepard

35 Livingston Street

Zip

RI

Secretary Name

Street Address

Barry Shepard

35 Livingston Street

Treasurer Name

Barry Shepard

Providence

Street Address

City

as above

Zip

02904 RΙ Providence

Director Name

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

Adam D. Shepard

Street Address as above Barry Shepard Street Address

State

Zip

as above City

Director Name

Street Address

State

State

ZIp

2.10

Director Name

City

City

Street Address

State Zip City

State

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

ZIP

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

AUTHORIZED SHARES Number of Shares

Class/Series

Par Value

ISSUED SHARES Number of Shares

Class/Series

Par Value

300 SHS NO PAR COM

100

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: Nobel 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 statements contained herein are true and correct.

Barry Shepard Print or Type Name of Officer

Treasurer

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

CECKIM MOST BE TITED IN BEAC					
1. Carparate ID No. 19716	2. Name of Corpora LENOX CH	EMICAL COMPANY			
3. Street Address Principal Business O	Office		City	State	Zip
35 Livingston Str	eet		Providence	RI	02904
4. Business Phone No.		5. State of Incorporation			6. SIC Code
(401) 521-7474		RHODE ISLA	ND		1883
7. Brief Description of the Character of	of Business Conducted	in Rhode Island			•
Manufacturing and	selling in	dustrial and tex	tile merchandise.		
8. NAMES AND ADDRESS	_			BEFORE USING ATTA	CHMENTS .
President Name			Vice President Name		• •
Leonard Shaftin			Adam D. Shepard	1	
Street Address			Street Address		
201 178th Dr.			35 Livingston S	treet	•
City	State	ZIp	City	State	Zip
No. Miami	FL		Providence	RI	02904
Secretary Name	•	• • • • • • • • • • • • • • • • • • • •	Treasurer Name	• • •	• • • • • • • • • • • • • • • • • • • •
Barry Shepard			Barry Shepard		
Street Address			Street Address		
35 Livingston Str	reet				
City	State	Zip	City	State	Zip
Providence	RI	02904			1
9. NAMES AND ADDRESS	ES OF THE DIR	ECTORS ("X" BOX FOR AT	TACHMENT) FILL IN SPAC	ES BEFORE USING ATT	ACHMENTS
Director Name			Director Name		•
Adam D. Shepard			Barry Shepard		
Street Address			Street Address		
As above			As above		
City	State	Zip	City	State	Zip
Director Name	• • •	*** . *** ****	Director Name	•••••	••••,•••••
Leonard Shaftin					
Street Address			. Street Address		
As above					
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED	) ("X" BOX FOR ATT	ACHMENT)	11. SHARES ISSUED	(*X* BOX FOR ATTACHMEN	T)
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Far Value	Number of Shares	Class/Series	Par Value
300 SHS NO PAR CO	M		100	Common	No Par Value
			•		
This report must be signe	d in ink by eit	her the President, Vice	President, Secretary, Ass	istant Secretary, Treas	urer, Receiver or Truste
{					
		E111 / E B 1			

File Date:	F6 5 99
Check No.:	6891
Ву:	30. /00
	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 Signature of Officer Barry Shepard Print or Type Name of Officer Treasurer

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)

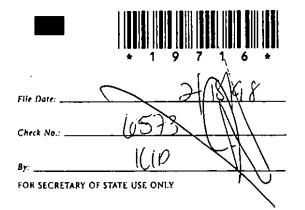
1. Corporate ID No.

2. Name of Corporation

19716 3. Street Address Principal Business	LENOX CHEMIC	CAL COMPANY	City	State	Zip
35 Livingston 4. Business Phone No.	Street	5. State of Incorporation	Providence	RI	02904 6. SIC Code
401-521-7474 7. Brief Description of the Character	of Business Conducted in Rho	RHODE ISLAND			1883
Manufacturing 8. NAMES AND ADDRES President Name	and selling t ses of the officer	ndustrial and S (*X* BOX FOR ATTACHM	d textile merch (ENT) Vice President Name	andise.	
Leonard Shafti	n		Adam D. Shepar	d .	
201 178th Dr.	State	Zip	35 Livingston	Street State	Zip
No. Miami Secretary Name	FL		Providence Treasurer Name	RI	02904
Barry Shepard Street Address			Barry Shepard Street Address		
35 Livingston city	Street State	Zip	As above	State	Zip
Providence 9. NAMES AND ADDRES Director Name	RI SES OF THE DIRECTO	02904 DRS (*X* BOX FOR ATTAC	HMENT) Director Name		
Adam D. Shepar	·d		Barry Shepard Street Address		
As above	State	Zip	As above	State	Zip
Director Name		•	Director Name		•
Leonard Shafti	n		Street Address		
As above	State	Zip	City	State	219
10. SHARES AUTHORIZE AUTHORIZED SHARES	D ("X" BOX FOR ATTACHN	AENT)	11. SHARES ISSUED (*X*	BOX FOR ATTACHMENT)	
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value

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

100



300 SHS NO PAR COM

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

Common

No par value

Barry Shepard

Print or Type Name of Officer

Treasurer 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 1997

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 19716

LENOX CHEMICAL COMPANY

3. Street Address Principal Business Office 35 Livingston Street

State

4. Business Phone No.

5. State of Incorporation RHODE ISLAND 1883

02904

401-521-7474

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

Manufacturing and selling industrial and textile merchandise.

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

President Name Leonard Shaftan Street Address

City

Vice President Name

Street Address

Providence

Adam D. Shepard

511 Bayshore Drive Apt. 1003

Zip

City

35 Livingston Street

City

Providence

Street Address

RI

02904

Secretary Nume

Ft. Lauderdale

33304 FL

Treasurer Name Barry Shepard

Barry Shepard

Street Address

35 Livingston Street

State

State

35 Livingston STreet

Providence

RI

02904

Providence

RI

02904

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

Director Name

Street Address

City

As above

**Director Name** 

Barry Shepard

Street Address

As above

State

State

Zip

Director Name

Leonard Shaftan

Adam D. Shepard

Street Address

Director Name

Street Address

As above

City

State

State

Zip

Zip

City

Cliv

State

Zip

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

AUTHORIZED SHARES Number of Shares

Class/Series

Par Value

ESSUED SHARES . Number of Shares

Class/Series

Par Value

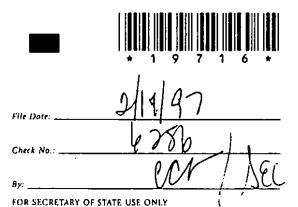
300 SHS NO PAR COM

100

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 correc

Barry Shepard Print or Type Name of Officer

Treasurer

Signature of Officer

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

Filina	Eag.	<b>\$</b> ፍለ	ሰበ
riimu	ree.	JOU.	UU

CORPORATE ID NO		PLEASE TYPE OR				
CURPORATE ID NO.	2. NAME OF CORPORATIO	N .		· · · · · · · · · · · · · · · · · · ·		
19716	LENO	X CHEMICAL COMPA	 N <b>Y</b>			
STREET ADDRESS PRINCIPAL BUSINES	S OFFICE		ăiv	STATE	ZIP 0000€	
35 Livingston S	Street		Providence	RI	02904	
SUSINESS PHONE NO.	· · · · · · · · · · · · · · · · · · ·	5. STATE OF INCORPORATION			6 SIC CODE	
401-521-7474 RHODE ISL		SLAND		1883		
BRIEF DESCRIPTION OF THE CHARACTE	R OF BUSINESS CONDUCTED IN RH	DOE ISLAND			<del></del>	
Manufacturing a	and selling in	dustrial and tex	tile merchandise.			
ESIDENT NAME			LESSES OF THE OIL	FFICERS	· · · · · · · · · · · · · · · · · · ·	
Leonard Shaftin	1		Adam D. Shepard	<u> </u>		
REET ADORESS			STREET ADDRESS		<del></del>	
201 178th Dr.	, STATE	ZIP CODE	35 Livingston S	treet	ZIP CODE	
	FL	:		PI RI	02904	
No. Miami CRETARY NAME	THE PARTY OF THE P		Providence			
Barry Shepard	<del></del>		Barry Shepard			
				- <del></del>		
35 Livingston S	Street	75 CODE	35 Livingston S	35 Livingston Street		
Providence	! RI		The second 1	1 57	1 00001	
RECTOR NAME	9 . N	AMES AND ADDR	DIRECTOR HAME	RIIRI		
RECTOR NAME Adam D. Shepare REET ADORESS	9 . N	· · · · · · · · · · · · · · · · · · ·	LESSES OF THE D			
RECTOR NAME Adam D. Shepare REET ADORESS	9. N	AMES AND ADDR	DIRECTOR HAME  Barry Shepard  STREET ADDRESS  As above	IRECTORS		
RECTOR NAME Adam D. Sheparo	9 . N	· · · · · · · · · · · · · · · · · · ·	DIRECTOR HAME  Barry Shepard  STREET ADDRESS		02904  20° COOE	
Adam D. Sheparo Rest ADORESS As above	9. N	AMES AND ADDR	DIRECTOR HAME  Barry Shepard  STREET ADDRESS  As above	IRECTORS		
Adam D. Shepare REET ADORESS  As above  THECTOR NAME  Leonard Shaftin	STATE	AMES AND ADDR	DIRECTOR NAME  Barry Shepard  STREET ADDRESS  As above  CITY  DIRECTOR NAME	IRECTORS		
Adam D. Sheparo REET ADORESS  As above  RECTOR NAME Leonard Shaftin	STATE	AMES AND ADDR	DRECTOR HAME  Barry Shepard  STREET ADDRESS  As above	IRECTORS		
Adam D. Sheparo REET ADORESS  As above  RECTOR NAME  Leonard Shaftin  REET ADORESS  As above	STATE	AMES AND ADDR	DIRECTOR NAME  Barry Shepard  STREET ADDRESS  As above  CITY  DIRECTOR NAME	IRECTORS		
RECTOR NAME Adam D. Shepare REET ADORESS	STATE	AMES AND ADDR	DIRECTOR HAME  Barry Shepard  STREET ADDRESS  As above  CITY  DIRECTOR NAME	STATE	ZP CO0€	
Adam D. Sheparo REET ADORESS  As above  RECTOR NAME  Leonard Shaftin  REET ADORESS  As above	STATE  STATE  1 0 .	ZIP CODE	DIRECTOR HAME  Barry Shepard  STREET ADDRESS  As above  GIY  DIRECTOR NAME  STREET ADDRESS	STATE	ZP CO0€	
Adam D. Sheparo REET ADORESS  As above  RECTOR NAME  Leonard Shaftin  REET ADORESS  As above	STATE	ZIP CODE	DIRECTOR HAME  Barry Shepard  STREET ADDRESS  As above  GIY  DIRECTOR NAME  STREET ADDRESS	STATE	ZP CO0€	
Adam D. Shepare RECTOR NAME As above RECTOR NAME Leonard Shaftin RECT ADDRESS As above NY ARMSER OF SHARES	STATE  STATE  1 0 .  AUTHORIZED SHARES  CLASS/SERES	ZP CODE	DIRECTOR HAME  Barry Shepard  STREET ADDRESS  As above  CITY  DIRECTOR NAME  STREET ADDRESS  CITY  MIMBER OF SHARES	STATE  STATE  STATE  ISSUED SHARES  CLASS/SEVES	ZIP CODE  ZIP CODE	
Adam D. Shepare RECTOR NAME  As above  RECTOR NAME  Leonard Shaftin RECT ADDRESS  As above	STATE  STATE  1 0 .  AUTHORIZED SHARES  CLASS/SERES	ZP CODE	DIRECTOR HAME  Barry Shepard  STREET ADDRESS  As above  CITY  DIRECTOR NAME  STREET ADDRESS  OTY	STATE  STATE  ISSUED SHARES	∑2° C00€	
Adam D. Shepare RECTOR NAME As above RECTOR NAME Leonard Shaftin RECT ADDRESS As above NY ARMSER OF SHARES	STATE  STATE  1 0 .  AUTHORIZED SHARES  CLASS/SERES	ZP CODE	DIRECTOR HAME  Barry Shepard  STREET ADDRESS  As above  CITY  DIRECTOR NAME  STREET ADDRESS  CITY  MIMBER OF SHARES	STATE  STATE  STATE  ISSUED SHARES  CLASS/SEVES	ZIP CODE  ZIP CODE	
Adam D. Shepare RECTOR NAME As above RECTOR NAME Leonard Shaftin RECT ADDRESS As above NY ARMSER OF SHARES	STATE  STATE  1 0 .  AUTHORIZED SHARES  CLASS/SERES	ZP CODE	DIRECTOR HAME  Barry Shepard  STREET ADDRESS  As above  CITY  DIRECTOR NAME  STREET ADDRESS  CITY  MIMBER OF SHARES	STATE  STATE  STATE  ISSUED SHARES  CLASS/SEVES	ZIP CODE  ZIP CODE	
Adam D. Shepare RECTOR NAME As above RECTOR NAME Leonard Shaftin RECT ADDRESS As above NY ARMSER OF SHARES	STATE  STATE  1 0 .  AUTHORIZED SHARES  CLASS/SERES	ZP CODE	DIRECTOR HAME  Barry Shepard  STREET ADDRESS  As above  CITY  DIRECTOR NAME  STREET ADDRESS  CITY  MIMBER OF SHARES	STATE  STATE  STATE  ISSUED SHARES  CLASS/SEVES	ZIP CODE  ZIP CODE	
Adam D. Shepare RECTOR NAME As above RECTOR NAME Leonard Shaftin RECT ADDRESS As above NY ARMSER OF SHARES	STATE  STATE  1 0 .  AUTHORIZED SHARES  CLASS/SERES  O PAR COM	ZIP CODE  ZIP CODE  S H A R E S A U T H O R	DIRECTOR HAME  Barry Shepard  STREET ADDRESS  As above  CITY  DIRECTOR NAME  STREET ADDRESS  CITY  MIMBER OF SHARES	STATE  STATE  STATE  ISSUED SHARES  CASS/SEPTES  COMMON	ZIP CODE  ZIP CODE	

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:

Check No:

Ву:

For Secretary of State Use Only

Barry Shepard Print or Type Name of Officer

Treasurer Title of Officer

# State of Rhode Island and Providence Plantations Office of The Secretary of State 130 North Main Street Providence, Rhode Island 02903-1335 401-277-3040

Corporate ID:

ANNUAL REPORT

Please Type or Print File Annually – Jan. 1 - March 1 Filing Fee \$50.00

Make Checks Payable to: Secretary of State

1995

#### ALL ENTRIES MUST BE COMPLETED IN FULL OR THE FORM WILL BE RETURNED.

0019716

Name of Corporation: LENOX CHEMICAL COM Business entity organized under the laws of the State of: Rhode Isla	PANY and Business Entity is (check one):
For foreign entity, address and telephone number of principal office:	Business Corporation (See RIGL Chapter 7-1.1)
Not Applicable	[ ] Professional Service Corporation (See RIGL Chapter 7-5.1)
Not Applicable	Brief statement of the character of business conducted in Rhode Island:
Phone:	brief statement of the character of business conducted in Knode Island:
Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):	Manufacturing and selling industrial and textile merchandise.
	• ··
Phone: (401) 521-7474	
	THE OFFICERS ARE:
	ADDRESS CITY/STATE ZIP CODE
	1 178th Dr., No. Miami, FL
JIREE	ZIFCODE
	Livingston St., Providence, RI  ADDRESS CITY/STATE ZIRCODE
	Livingston St., Providence, RI
	ADDRESS CITY/STATE ZIPCODE
Barry Shepard As	above
THE NAMES OF 1	THE DIRECTORS ARE:
NAME STREET	ADDRESS CITY/STATE ZIP CODE
<del></del>	above
JIRECI	ADDRESS CITY/STATE ZIP CODE
	ADDRESS CITY/STATE TO THE CODE
31643	ADDRESS CITY/STATE ZIPCODE S above
	- ILED
NUMBER OF SHARES AUTHORIZED (Rider may be attached)	NUMBER OF SHARES ISSUED AND OUTSTANDING (R: JAN) be awached)
Number of Shares Class / Series	Number of Shares Class / Series By COHE
300 Common	100 common Saga
Without par	Without par
Date	Banghad
POINT	Barry Shepard  R TYPE NAME OF OFFICER SIGNING Treasurer
F	R TYPE NAME OF OFFICER SIGNING Treasurer FOFFICER SIGNING
	GENT FOR SERVICE OF PROCESS:

Annual Report for the year:

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

BARRY SHEPARD 35 LIVINGSTON STREET PROVIDENCE, RI 02904

Filing Fee \$50.90 Payable to. Secretary of State

#### PLEASE TYPE or PRINT

52639B State of Rhode Island and Providence Plantations File Annually LLC Sept 1 - Nov 1 CORP: Jan. 1 - March 1

## Office of The Secretary of State

100 North Main Street Providence, Rhode Island 02903-1335 401-277-3040

Corporate ID:	19716	Annual Report for the year:1994
Name of Business Entity: _	LENOX CHEMICAL COMPANY	
	r the laws of the State of Rhode Island	Business Entity is (check one).
Federal Taxpayer Identification		[X] Business Corporation (See RIGL Chapter 7-11) [ ] Professional Service Corporation (See RIGL Chapter 7-5.1) [ ] Limited Liability Company (See RIGL 7-16)
- '	licable	Name, title and mailing address of contact person to whom communications may be directed.
		Barry Shepard 35 Livingston Street
Phone ()		Providence, Rhode Island
	nneipal office of business entity in Rhode	<u> </u>
35 Livingston Stre		Brief statement of the character of business conducted in Rhode Island:  Manufacturing and selling industrial and
Providence, Rhode		textile merchandise.
		Date of Organization: 6/23/59
Prione ( 401) 521-7	474	Date of Qualification to do business in Rhode Island (if foreign entity):  No applicable
	THE NAMES OF	THE OFFICERS ARE:
[ CHAFTENFOUTIVE CONCEROR ]	李 PRESIDEST (Orect Ore) STREET	ADDRESS CLYSTATE ZIPCODE
Leonard Shaft in	▼ VICE PRES DENTIFICAÇÃO DEL  STREE*  **TREE*  **TRE	201 178th Dr., No. Miami, Florida
Adam D. Shepard	SECRETARY (Check Ow) STREET	35 Livingston Street, Providence, RI FADDRESS CHASTAIL ZIECODE
Barry Shepard	X TABASURER (CINA Cine) STREET	35 Livingston Street, Providence, RI ADDRESS CLYSTATE ZERCOM.
Barry Shepard		35 Livingston Street, Providence, RI
NAME	THE NAMES OF	THE DIRECTORS ARE:
Adam D. Shepard		35 Livingston Street, Providence, RI
Barry Shepard		35 Livingston Street, Providence, RI ADDRESS CONSTARE ZAPCODE
Leonard Shaft n		201 178th Dr., No. Miami, Florida
NUMBER OF SHARES AUT	FHORIZED (If Applicable)	NUMBER OF SHARES ISSUED AND OUTSTANDING (If Applicable)
NUMBER 300		NUMBER 100
CLASS Common		CLASS Common : : 🕽
SERIES		SERIES .14 1 9 1994
PAR VALUE OR WITHOUT PAR With	out par	PAR VALUE OR SEC Y OF STATE WITHOUT PAR Without par
Date ///	. 19 <u>94</u> By <u>2</u>	Barphal
	<u> ११ जिल</u>	Barry Shepard
	-mui	Treasurer of official signing
form 31 - 1/84		
D	<u>ESIGNATED REGISTERED OR RES</u>	IDENT 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.

To be filed annually between January 1 and March 1

## STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS CORPORATION DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

CORPORATE ID19716		ANNUAL REPORT FOR 1993
NAME: LENOX CHEM	ICAL COMPA	ANY
STATE OF INCORPORATION: _	Rhode Isl	land
CHARACTER OF BUSINESS:	Manufactu	ring and selling industrial and
	textile n	merchandise.
IF FOREIGN, ADDRESS OF PR	INCIPAL OF	FFICE: Not Applicable
BUSINESS ADDRESS IN RHODE	ISLAND:	35 Livingston Street,
	Providenc	ce, RI - Barry Shepard
NAMES AND ADDRESSES OF DI	RECTORS A	ND OFFICERS:
Adam D. Shepard	Director	35 Livingston St., Providence, RI
Barry Shepard	Director	35 Livingston St., Providence, RI
Leonard Shaftin	Director	201 178th Dr., No. Miami, Florida
Leonard Shaftin	Pres.	As above
Adam D. Shepard V	ice Pres.	As above
Barry Shepard	Sec.	As above
Barry Shepard	Treas.	AS above
		CECRETARY OF STATE
Authorized shares:30	O Commo	n No par value
Issued:10	<u>0</u> Commo:	n No par value
Dated	19 <u>93</u>	By Bum leas
		Title but thide

## STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS CORPORATION DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

CORPORATE ID19716	ANNUAL REPORT FOR 1991
NAME:	LENOX CHEMICAL COMPANY
STATE OF INCORPORATION	Rhode Island
CHARACTER OF BUSINESS:	Manufacturing and selling industrial and
<u> </u>	textile merchandise.
IF FOREIGN, ADDRESS OF	PRINCIPAL OFFICE: Not Applicable
BUSINESS ADDRESS IN RHO	DDE ISLAND: 35 Livingston St., Providence,
Rhode Island - c/o	Barry Shepard
NAMES AND ADDRESSES OF	DIRECTORS AND OFFICERS:
Michael Shepard	Director 35 Livingston St., Providence, RI
Barry Shepard	Director 35 Livingston St., Providence, RI
Leonard Shaftin	Director 201 178th Dr., No. Miami, FL
Leonard Shaftin	President <u>As above</u>
Barry Shepard	Vice Pres. <u>As above</u>
Barry Shepard	_Secretary <u>As above</u>
Michael Shepard	Treasurer <u>As above</u>
Authorized shares: 3	00 Common No par value
Issued: 1	OO No par value
Dated Jenney 7/	, 19 <u>91 LENOX CHEMICAL COMPANY</u>
$\mathcal{O}$	Bu Bana Shan
	by permy francis
	Title Sicklay

P

## STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS CORPORATION DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

CORPORATE ID19716	ANNUAL REPORT FOR 1990	
NAME:	LENOX CHEMICAL COMPANY	
STATE OF INCORPORATION:	Rhode Island	
CHARACTER OF BUSINESS:_	Manufacturing and selling industrial and	<u>d</u>
	textile merchandise.	
IF FOREIGN, ADDRESS OF	PRINCIPAL OFFICE: Not Applicable	
BUSINESS ADDRESS IN RHO	DDE ISLAND: 35 Livingston St., Providence	
Rhode Island - c/o	Barry Shepard	
NAMES AND ADDRESSES OF	DIRECTORS AND OFFICERS:	
Michael Shepard	Director 35 Livingston St., Providence,	RI
Barry Shepard	Director 35 Livingston St., Providence,	<u>RI</u>
Leonard Shaftan	Director 201 178th Dr., No. Miami, FL	
Leonard Shaftan	President <u>As above</u>	
Barry Shepard	_Vice Pres. <u>As above</u>	
Barry Shepard	Secretary <u>As above</u>	
Michael Shepard	Treasurer <u>As above</u>	
Authorized shares: 30	00 Common No par value	
Issued:10	00 Common No par value	
Dated Jan 29	By Bankan	<u></u>

## State of Rhode Island and Frovidence Plantations CORPORATIONS DIVISION 270 WESTMINSTER MALL PROVIDENCE, RHODE ISLAND 02903

Corporate ID 19716		Annual Report for the year	ar1989		
FIRST: The name of t	he corporation is	LENDX CHEMICAL COMPANY			
SECOND: It is incorpo	rated under the laws of	£hode 1	sland		
THIRD: Character of l	ousiness, briefly stated, is	Manufacturing and sel	ling industrial		
and textile mercha	ndise.				
FOURTH: If foreign co	orporation, address of its p	rincipal office	N/A		
FIFTH: Business addre	ess in Rhode Island	35 Livingston St., Pr	ovidence, R. I.		
Sixth: Names and ad	dresses of its directors and	Officers: Address (including number	(Attach rider if necessary)		
Michael Shepard	Director	35 Livingston St., Pr	ovidence, R. I.		
Barry Shepard	Director	35 Livingston St., Pr	ovidence, R. I.		
Leonard Shaftin	Director	201 178th Dr., No. Mi	ami, Florida		
Leonard Shaftin	President	As above			
Barry Shepard	Vice Preside	ent As above			
Barry Shepard	Secretary	As above			
Michael Shepard	Treasurer	As above	·····		
SEVENTH: Number of	Shares authorized:		Par Value or statement that shares are without		
No. of Shares	Class	Series	par value		
300	Common	PAID	No par value		
EIGHTH: Number of S	Shares issued:	JAN 30 1989	Par Value or statement that		
No. of Shares	Class	SECTY OF STATE	shares are without par value		
100	Common		No par value		
Dated Jany 23	19 .89	LENOX CHEMICAL COMPANY (Name of Corporation)	·		
(Report must be sign	I led by an officer)	By Bang Olym Title Suration	orl		

# State of Rhode Island and Frovidence Plantations CORPORATIONS DIVISION 270 WESTMINSTER MALL PROVIDENCE, RHODE ISLAND 02903

Corporate ID. 19716	•••••••••••••••••••••••••••••••••••••••	Annual Report for	r the year 1988
First: The name of	the corporation is LENO	K CHEMICAL COMPANY	
_			l i selling industrial an
			Α
			N/A
FIFTH: Business add	ress in Rhode Island	35 Livingston St	., Providence, R. I.
SIXTH: Names and a	ddresses of its directors and		(Attach rider if necessary)
Michael Shepard	Director	35 Livingston St	., Providence, RI
Barry Shepard	Director	35 Livingston St	t., Providence, RI
Leonard Shaftin	Director	201 178th Dr., N	No. Miami, Florida
Leonard Shaftin	President	As above	
	Vice Presider	nt	•••••••••••••••••••••••••••••••••••••••
Michael Shepard	Secretary	As above	
Michael Shepard	Treasurer	As above	
SEVENTH: Number of	f Shares authorized:		Par Value or statement that shares are without
No. of Shares	Class Common	<b>PAÎÜ</b> JAN 25 1988	No par value
EIGHTH: Number of	Shares issued:	SECY. OF STATE	Par Value or statement that shares are without par value
100	Common		No par value
Dated	) <u> </u>	LENOX CHEMICAL CO	DMPANY
(Report must be sig	ned by an officer) Ti	de Secretary	

## State of Rhode Island and Providence Plantations CORPORATIONS DIVISION 270 WESTMINSTER MALL PROVIDENCE, RHODE ISLAND 02903

Corporate ID197	16	Annual Report for the	e year1987
FIRST: The name of the	corporation isLENOX	CHEMICAL COMPANY	
Second: It is incorporate	ated under the laws of	Rhode Island	•••••••••••••••••••••••••••••••••••••••
THIRD: Character of bu	ısiness, briesly stated, is	Manufacturing and	d selling industrial
and textile mercha	ndise.		
FOURTH: If foreign cor			
FIFTH: Business addres			., Providence, R. I.
SIXTH: Names and add	resses of its directors and o		(Attach rider if necessary) umber, street, zip code)
Michael Shepard	Director	35 Livingston St	., Providence, R. I.
Barry Shepard	Director	35 Livingston St	., Providence, R. I.
Leonard Shaft <b>a</b> n	Director	201 178th Dr., No	orth Miami, Fl
Leonard Shaft <b>A</b> n	President	As above	
		l	
Michael Shepard	Secretary	As-above 35 L/L	ungston St PROX
Michael Shepard		As above	
SEVENTH: Number of S	Shares authorized:		Par Value or statement that
No. of Shares	Class	Series APP 3	shares are without par value No par value
300	Common		No par value
Eighth: Number of Sh	nares issued:	PAID N 30 1987	Par Value
	JA <sup>1</sup>	130 1301	or statement that shares are without
No. of Shares	Common SEC	小OE ZZzzyzy	parvalue No par value
Dated James To	1987 L.	ENOX CHEMICAL COMPA	
(Report must be signe	d by an officer) Tit	le detretrins	

## State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION 270 WEST MINSTER MALL PROVIDENCE, RHODE ISLAND 02903

Corporate ID		Annual Report for t	he year1986
First: The name of	the corporation isLENOX	CHEMICAL COMPANY	······································
SECOND: It is incorp	orated under the laws of		
THIRD: Character of	business, briefly stated, is	Manufacturing and	selling industrial
and textile merch	andise.		
FOURTH: If foreign c		_	
Fifth: Business addr			. Providence, RI
SIXTH: Names and a	ddresses of its directors and		(Attach rider if necessary)
Michael Shepard	Director	35 Livingston St.	, Providence, RI
Barry Shepard	Director	35 Livingston St.	, Providence, RI
Leonard Shaftin	Director	201 178th Dr., Su North Miami, Flor	nny Isles Shores,
Leonard Shaftin	President	•	
None	Vice Preside	nt	
Michael Shepard	Secretary	As above	• • • • • • • • • • • • • • • • • • •
.Michael Shepard	Treasurer	As above	
	f Shares authorized:		Par Value or statement that shares are without
No. of Shares	Class	Series	par value
300	Common		No par value
EIGHTH: Number of	Shares issued:		Par Value or statement that shares are without
No. of Shares	Class Common	Series	par value
100	Common		No par value
Dated Rec'	2 19 86 d. & Filed MAR 15 1986	LENOX CHEMICAL COMP	ANY
(Report must be signated as 1 1/85	· · · · · · · · · · · · · · · · · · ·	itle Michael Shepar	d, Secretary

Filing fee: \$15 00

#### ID # 19716

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

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

1985

Annual Report for the year

FIRST: The name of the corporation is

LENOX CHEMICAL COMPANY

SECOND: It is incorporated under the laws of

Rhode Island

THIRD: Character of business, briefly stated, is

Manufacturing and selling

industrial and textile merchandise.

FOURTH: If foreign corporation, address of its principal office

N/A

FIFTH: Business address in Rhode Island

35 Livingston St., Providence, RI

SIXTH: Names and addresses of its directors and officers:

(Addresses must include street and number, if any)

Name	Office	Address
Michael Shepard	Director	35 Livingston St., Prov., RI
Barry Shepard	Director	35 Livingston St., Prov., RI
Leonard Shaftin	Director .	201 178th Dr., No. Miami, FL
Leonard Shaftin	President	As above
None	Vice President	
Michael Shepard	Secretary	As above
Michael Shepard (If additional space is needed, at		As above

SEVENTH: Number of Shares authorized:

Par Value or statement that shares are without par value

No. of Shares 300

Class Common Series

No par value

EIGHTH: Number of Shares issued:

Par Value or statement that shares are without par value

No. of Shares 100

Class Common Series

Name of Corporations

No par value

Dated:

85 19.

LENOX CHEMICAL COMPANY

Title Michael Shepard, Treasurer

(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

## State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

First:	The name o		Annual Report for the is LENOX CHEMIC	
r Inst.	The name o	t the corporation	15	100 to
SECOND	: It is incor	porated under th	ne laws of R	hode Island
THIRD:	Character o	f business, briefly	stated, is Manufact	uring and selling
industri	al and tex	tile merchand	ise.	
Fourth	: If foreign	n corporation, ad	dress of its principal	office N/A
FIFTH:	Business ac	ldress in Rho <mark>de</mark> l	Island (blank reports	will be mailed to this
address)	35 I	ivingston St.	, Providence, RI	
Sixth:	Names and	addresses of its	directors and officers	:
	(Addresse	s must include street a	nd number, if any)	
Michael	Name Shepard	Office Director		ddress n St., Prov., RI
Barry Sh	nepard	Director	35 Livingsto	n St., Prov., RI
Leonard	Shaftin	Director	201 178th Dr	., No. Miami, FL
Leonard	Shaftin	President	As above	
None		Vice Presid	ent	
Michael	Shepard	Secretary	As above	
Michael	Shepard lace is needed, o	Treasurer	As above	,
SEVENT	н: Number	of Shares author	rized:	Par Value or statement that
No. of St	nares	Class	Series	shares are without par value
300	ס	Common		No par value
Еіднтн	: Number	of Shares issued	:	Par Value or statement that
No. of Si		Class	Series	shares are without par value
100	0	Common 1		No par value
Dated:	January 12		LIENOX CHEMIC	CAL COMPANY
		`* N	(Name of Corresponding)	
		2 :::	By Murtael	apar
		0 = 11 (i	Title Michael Sher	
		•	(Report must be s	igned by an officer)

If the corporation has changed is registered office and/or its registered agent, Form #9 must be filed. Please contact Corporation Division for information. 277-3040

### State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

			Annual Report for th	ie year 1983	} <sub></sub>	
FIRST:	The name of t	he corporation	is LENOX CHEMICA	L COMPANY		
*****						
SECOND:	It is incorpo	rated under th	elaws of Rhode Is	land		
THIRD:	Character of b	usiness, briefly	stated, is Manufact	uring and sel	ling	
industrial and	textile merch	andise.				
Fourth:	If foreign o	corporation, ad	dress of its principa	ıl office N/A		
Y2		to Diede I		a will be mail	ad to this	
			sland (blank report			
address) 33.	_		.R <sub>t</sub> I,			
Sixth:			directors and office	rs:		
	(Addresses m	ust include street a	nd number, if any)			
	Name	Office		Address		
Michael Shepar	d .	Director	35 Livingston	ı St., Provide	nce, R. I.	
Barry Shepard		Director	35 Livingston	St., Provide	ence, R. I.	
Leonard Shafti	n	Director	201 178th Dr.	, Surny Isles	Shores, No.	Miami, FL
Leonard Shafti	<b>n</b>	President	As above.			
		Vice Preside	ent			
Michael Shepar	'd	Secretary	As above			
Michael Shepar	d aco is needed, atta	Treasurer	As above			
Seventi	i: Number of	Shares author	rized:	Par Vi or stateme		
No. of She	ares	Class	Series	shares are par va		
300		Common		No par v	<i>r</i> alue	
				FEB 14 198	33	
Еіснтн	: Number of	Shares issued:	:	Par V		
No. of Sh	ares	Class	Series .	shares are par vi	without	
100		Common	2	No par va	alue	
Dated:		. 19	33 LENOX CHEMICA (Natice of Corporation) By Julian Step Title Michael Shep	· · · <b>· //</b> · · · · ·	5y.	<del>-</del>
			(Report must be	signed by an or	fficer)	
٢			•			

131

Filing fee: \$15.00

## State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

			Annual Report for	the year 1982	
First:	The name of t	he corporation	is LENOX CHEMIC	CAL COMPANY	
SECOND:	It is incorpo	orated under the	e laws of Rhodo	e Island	
THIRD:	Character of t	ousiness, briefly	stated, is		
manufacturin	ng and sell:	ing industria	al and textile	merchandise.	
	•	corporation, add	dress of its princi	pal office	
not appli	cable				
FIFTH:	Business addi	ress in Rhode Is	sland (blank repor	rts will be mailed to this	
address) 35	Livingston	St., Provide	ence, R.I.		
Sixth:	Names and a	ddresses of its	directors and offic	cers:	
	(Addresses m	nust include street ar	nd number, if any)		
>	I ume	Office		Address	
Michael Sh	nepard	Director	35 Livingsto	on St., Providence.	RI
Barry Shep	pard	Director	35 Livingst	on St., Providence,	RI
Leonard St	naftin	Director	201 178th D	r., Sunny Isles Shor North Miami, Flori	es da
Leonard Sh	aftin	President	(as above)		
		Vice Preside	ent		
Michael Sh	iepard	Secretary	(as above)		
Michael Sh (If additional spa	nepard ce is needed, atta	Treasurer	(as above)		
Seventh	: Number of	f Shares author	ized:	Par Value or statement that	
No. of Sha	res	Class	Series	shares are without par value	
300		common	n/a	no par value	
Еіснтн:	Number of	Shares issued:	FEB 1	6 1382  Par Value  or statement that  shares are without	
No. of Sha	res	Class	Series i	par value	
100		common	n/a	2 no par value	
Dated:	chury 3	1982	LENOX CHEMIC (Name of Corperation By	ang ng Grand and a said	
			TitleMichael Sh	epard, Treasurer	
			(Report must I	be signed by an officer)	
				<del></del>	1

If the corporation has changed its registered office and/or its edistered agent, Form #9 must be filed. Please contact Corporation Division for information. 277-3040

Filing fee: \$15.00

+ or m

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

## State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

#### 1981 ANNUAL REPORT

OF

LENOX C	HEMICAL COMPA	NY	
amended, the undersigned o		1.1-118 of the General y submits the following LENOX CHEMICAL CO	g annual report:
SECOND: It is incorpo	rated under the la	ws of Rhode Islan	d
THIRD: The address of 35 Livingston S	•••	fice in Rhode Island is	
and the name of its registe Barry Shepard	ered agent in Rho		s is
or country under the laws of FIFTH: The characte	of which it is inco	in which it is actually e	ngaged in Rhode
Island, briefly stated, is $- \frac{1}{100}$ textile merchandise	enufacturing	and selling industr	ial and
	•		
SIXTH: The names ar	nd respective addr	esses of its directors and	l officers are:
Michael Shepard	Director	35 Livingston Str	eet, Prov.,R.I
Barry Shepard	Director	11 11	
Leonard Shaftin	Director Director	201 178th Drive, Shores, North Mia	
	Director		
	Director		
Leonard Shaftin	President	и и,	n
	Vice Preside	nt	
Michael Shepard Michael Shepard	Secretary Treasurer	35 Livingston St	reet, Prov.,R.

SEVENTH: The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Treasurer

Number of Shares	<u>Class</u>	10 — <u>Series</u> 11	Par Value per Share or Statement that Shares are without Par Value
300	Common	n7536A.41	No Par Value
21 11 62		<b>5.</b> 00 5.00 BL	OCT 1 = 19

Eighth: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	<u>Series</u>	Par Value per Share or Statement that Shares are without Par Value
100	Common	n/a	No Par Value

Dated October 7, , 1981

LENOX CHEMICAL COMPANY

lts Treasurer

Filing fee: \$15.00

Form 31 8-79

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

	OF		
	Lenox Chemica	al Company	
Pursuant to the pro amended, the undersigned	visions of Section 7 d corporation hereb	7.1.1-118 of the Gene	ral Laws, 1956, as ing annual report:
e e e		and a summer of the particular tree	
SECOND: It is incor	porated under the	laws of State of	Rhode Island
THIRD: The address	_	ce in Rhode Island is	
and the name of its registe Francis A. Manzi, 1	red agent in Rhode l	Island at such address	is
country under the laws of v	vhich it is incorporat		office in the state or
	manufacturing	in which it is actually and selling indus	** **
SIXTH: The names a	and respective addre	sses of its directors an	d officers are:
Leonard Shaftan	Director	201 178th Dr.,	Sunny Isles Shores
Joseph Shepard	Director	Old River Rd.,	Sunny Isles Shores No. Miami, Fla Lincoln, R. I.
Michael Shepard	Director	92 Sheffield A	ve., Pawtucket, R. I.
Barry Shepard	Director	249 Summit Dr.	, Cranston, R. I.
	Director		
	Director		
Leonard Shaftan	President		
Joseph Shepard	Vice Preside	nt (Same as	a hove 1
Barry Shepard	Secretary	/oame as	
Michael Shepard	Treasurer		
SEVENTH: The aggre by classes, par value of sha	egate number of shar res, shares without p	res which it has author: parvalue,andseries,if a	ity to issue, itemized ny,withinaclass,is: Par Value per Share
Number of Shares	Class	Serres	or Statement that Shares are without Par Value
300	Common		No Par Value
		1267414	APR 1 5 1980

Eighth: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	Series	or Statement that Shares are without Par Value
100	Common		No Par Value

Dated February 20 , 1980

Lenox Chemical Company
NAME CLOSPOPATION)
By

Its Treasurer

Filing fee: \$15.00

Form 31 3CM 11-78

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

	OF,		
	Lenox Chemical	Company	
Pursuant to the provamended, the undersigned First: The name of	risions of Section 7.1. corporation hereby	.1-118 of the Go submits the foll	eneral Laws, 1956, as lowing annual report:
			And the second second
SECOND: It is incorp	porated under the lay	ws of State o	of Rhode Island
THIRD: The address	of its registered office :	in Rhode Island i	S
Printery Street, Pr	<del>-</del>		
and the name of its register	ed agent in Rhode Isla	and ascentobeaddo	<b>ces</b> is
Francis A. Manzi, l	**		
FOURTH: If a foreig	n corporation, the add	iress of its princi	pal office in the state or
country under the laws of w	- · · · · · · · · · · · · · · · · · · ·	_	
•			
			ally engaged in Rhode
Island, briefly stated, is textile merchandise	_		
textile merchandise	'		
•			en e
SIXTH: The names a	nd respective addresse Office	es of its directors	and officers are: Address
Leonard Shaftan	Director	201 178th Dr	r., No. Miami, Florida
Joseph Shepard	Director	Old River Ro	i., Lincoln, R. I.
Michael Shepard	Director	92 Sheffield	l_Ave., Pawtucket, R. I.
Barry Shepard	Director	249 Summit I	Or., Cranston, R. I.
	Director		
	Director		
Leonard Shaftan	President		
Joseph Shepard	Vice President		në as above)
Barry Shepard	Secretary	,	
Michael Shepard	Treasurer		
SEVENTH: The aggree by classes, par value of share			nority to issue, itemized ifany,withinaclass.is:
5) 0.00000, p. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	, <b></b>	<b>-</b> ,,	Par Value per Share
Number of	<b>C</b> )	3	or Statement that Shares are without
Shares	Class	Series .	Par Value
300	Common	79	No Par Value
		<b>~</b> •	
		6.5	
		1 · > *	
		- O - S	
		• •	

EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares Class Series Par Value per Share or Statement that Shares are without Par Value

100 Common No Par Value

Dated February 20, 1979

Lenox Chemical Company
(NAME OF COMPORATION)

 $\alpha = \alpha / a$ 

Secretary

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

OF

	01		
,	Lenox Chemical C	Company	
amended, the undersigne First: The name of	d corporation hereby sub of the corporation is	omits the followenox Chemi	cal Company
	porated under the laws o		f Rhode Island
THIRD: The address	ss of its registered office i		
and the name of its regist Francis A. Manzi.	ered agent in Rhode Islan 1008 Industrial Ba		
FOURTH: If a fore country under the laws of	= -	<del>-</del>	cipal office in the state or
FIFTH: The chara Island, briefly stated, is	cter of the business in v	which it is act	
	nd respective addresses of		
Leonard Shaftan	Director	201 178th	Dr. N. Miami, Florida
Joseph Shepard	Director	Old River	Rd., Lincoln, R. I.
Michael Shepard	Director	92 Sheffi	eld Ave., Pawtucket, R. I.
Barry Shepard	Director	249 Summit	t Dr., Cranston, R. I.
	Director		
	Director		
Leonard Shaftan	President		
Joseph Shepard	Vice President	150-0	as above)
Barry Shepard	Secretary	(came	
Michael Shepard	Treasurer		
SEVENTH: The agg by classes, par value of sha			athority to issue, itemized 3, if any, within a class, is:
Number of Shares	Class	Series.	Par Value per Share or Statement that Shares are without Par Value
300	Common	78 ·	No Par Value

48899A1&...1500BL

EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	Series	Par Value per Share or Statement that Shares are without Par Value
100	Common		No Par Value

Dated February 21 .1978

Ву

C. C. C.

Its Treasurer

Lenox Chemical Company

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

OF

Lenox Chemical Company

Pursuant to the provisions of Section 7.1.1-118 of the General Laws, 1956, as amended, the undersigned corporation hereby submits the following annual report:

FIRST: The name of the corporation is Lenox Chemical Company

SECOND: It is incorporated under the laws of State of Rhode Island

THIRD: The address of its registered office in Rhode Island is

Printery Street, Providence, R. I.

and the name of its registered agent in Rhode Island absuch address is

Francis A. Manzi, 1008 Industrial Bank Bldg., Providence, R. I.

FOURTH: If a foreign corporation, the address of its principal office in the state or country under the laws of which it is incorporated is

FIFTH: The character of the business in which it is actually engaged in Rhode Island, briefly stated, is manufacturing and selling industrial and textile merchandise

SIXTH: The names and respective addresses of its directors and officers are:

Name	Office	Address
Leonard Shaftan	Director	36 Seneca Rd., W. Hartford, Conn.
Joseph Shepard	Director	Old River Rd., Lincoln, R. I.
Michael Shepard	Director	92 Sheffield Ave., Pawtucket, R.
Barry Shepard	Director	Summit Drive, Cranston, R. I.
	Director	
	Director	
Leonard Shaftan	President	
Joseph Shepard	Vice President	(Seme as above)
Barry S. Shepard	Secretary	
Michael Shepard	Treasurer	

SEVENTH: The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	<u>Series</u>	or Statement that Shares are without Par Value
300	Common		No Par Value

r

FEB 15 1977

Par Value per Share

I.

Hi

FORM 31 35M 9-76

10.51

EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	Series	or Statement that Shares are without Par Value
100	Common		No Par Value

February Dated

, 1977

Lenox Chemical Company (NAME OF COMPORATION)

Ita Treasurer

Filing fee: \$15.00

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

### State of Chode Island and Providence Plantations Office of the secretary of state

#### ANNUAL REPORT

OF

***************************************	Lenox Chemi	cal Company	
amended, the undersigned	l corporation hereb	y submits the follo	General Laws, 1956, as wing annual report: ical Company
SECOND: It is incor	porated under the l	laws of State	of Rhode Island
	_		d is
and the name of its registe	red agent in Rhode	Island at suck add	ress is
Francis A. Manzi	, 1008 Industr	ial Bank Bldg.	, Providence, R. I.
FOURTH: If a foreign country under the laws of			ncipal office in the state or
FIFTH: The characteristic field of the state	manufactur	ing and sellin	
SIXTH: The names a	nd respective addr	esses of its director	s and officers are:
Leonard Shaftan	Director	36 Seneca R	d., W. Hartford, Conn.
Joseph Shepard	Director	Old River R	d., Lincoln, R. I.
Michael Shepard	Director	92 Sheffiel	d Ave., Pawtucket, R.I
	Director		
	Director		
Leonard Shaftan	President		
Joseph Shepard		nt(Same	as above)
Michael Shepard	•		
Michael Shepard	Treasurer		
SEVENTH: The aggroy classes, par value of shar			nthority to issue, itemized s, if any, within a class, is:
Number of Shares	Class	Series	Par Value per Share or Statement that Shares are without Par Value
300	Common		No Far Value



EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	Series	or Value per Share or Statement that Shares are without Par Value
100	Common		No Par Value

Dated February 16, 1976

Lenox Chemical Company

Its Secretary

ME 15-76 # 17.00 100 100 15.00

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

OF

A 1 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Lenox Chemic	al Company	.),,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Pursuant to the provamended, the undersigned First: The name of	corporation hereby the corporation is	submits the followin Lenox Chemica	l Company
			Angalan Bit annual Meannaide and a second
SECOND: It is incorp	porated under the la	ws ofState.of	Rhode Island
THIRD: The address	=	ice in Rhode Island is le Island	<b></b>
and the name of its registe Francis A. Manzi,			
country under the laws of	which it is incorpor		
FIFTH: The characteristics is textile merchandi	manufacturing		ully engaged in Rhode
SIXTH: The names a	nd respective addre	esses of its directors a	nd onicers are: Address
Leonard Shaftan	Director	•	, W. Hartford, Conn.
Joseph Shepard	Director		, Lincoln, R. I.
Michael Shepard	Director	92 Sheffield	Ave., Pawtucket, R. I.
	Director		The second second
	Director		
	Director	. ,	
Leonard Shaftan			
Joseph Shepard	Vice Presider	nt (Same as	above)
Michael Shepard	Secretary		and the second second
Michael Shepard	Treasurer		
SEVENTH: The aggi	regate number of shares, shares without p	ares which it has auth par value, and series, i	ority to issue, itemized f any, within a class, is :
Number of Shares	Ciass	<u>Series</u>	Par Value per Share or Statement that Shares are without Par Value
300	Common		No Par Value

EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	Series	or Statement that Shares are without Par Value
100	Common		No Par Value

Dated February 14, 1975

Lenox Chemical Company

hall byround

Ita Secretary and Treasurer

:1 17-75 STATE :1662 AR\*\*\*15.00

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

### State of Chode Island and Providence Plantations OFFICE OF THE SECRETARY OF STATE

#### ANNUAL REPORT

 $\mathbf{OF}$ 

<u>.</u>	enox Chemical	Company	9.0
Pursuant to the provision	poration hereby	submits the follow:	ing annual report:
FIRST: The name of the	-		toat company
			Rhode Island
THRD: The address of Printery Street, Provi	<del>-</del>		
and the name of its registered Francis A. Manzi, 1008	_		
FOURTH: If a foreign country under the laws of whi	-		
FIFTH: The character of briefly stated, is manufacter manufacter merchandise	the business in wheturing and se	nich it is actually en elling industr	ial and textile
SIXTH: The names and			
Leonard Shaftan			, W. Hartford, Conn.
Joseph Shepard	Director	Old River Rd.	, Lincoln, R. I.
Michael Shepard	Director	92 Sheffield	Ave., Pawtucket, R. I.
	Director		
	Director		
	Director		
Leonard Shaftan			
Joseph Shepard		(Same as a)	bove)
Michael Shepard	Secretary	, , , , , , , , , , , , , , , , , , ,	
Michael Shepard	Treasurer		
SEVENTH: The aggregate by classes, par value of shares, s			
- · · · · · ·	-		Par Value per Share or Statement that
Number of Shares	Class	Series	Shares are without Par Value
300	Common		No Par Value

MAR 13 1874

I'm

FORM 31 80M 8-72

EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	Series	or Statement that Shares are without Par Value
100	Common		No Par Value

Dated February 26 , 19 74

Lenox Chemical Company

Its Secretary and Treasurer

M -2-74 STAIR 2339 434\*\*\*15.00

Filing fee: \$15.00

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

### State of Chode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

#### ANNUAL REPORT

of

	Lenox Chemica	al Company	
Pursuant to the provi amended, the undersigned of FIRST: The name of the	corporation here	by submits the follow	eneral Laws, 1956, as wing annual report: cal Company
			And the second s
SECOND: It is incorpo	orated under the	laws of State o	f Rhode Island
THEO: The address of	of its registered	office in Rhode Island	d is
Printery Street, Prov	vidence, Rho	de Island	
and the name of its register	ed agent in Rho	de Island absackvede	<del>lras</del> s is
Francis A. Manzi, 100			
FOURTH: If a foreign	corporation, th	e address of its princ	ipal office in the state or
country under the laws of v			
	•		
Crome. The character	of the husiness in	n which it is actually e	ngaged in Rhode Island,
briefly stated, is manuf	orthebusinessii acturing and	selling industr	ial and textile
merchandise	40041.116		T w
SIXTH: The names an	nd respective ad	dresses of its director	's and officers are: Address
Leonard Shaftan	Director	36 Seneca Rd.	, W. Hartford, Conn.
Joseph Shepard	Director	Old River Ros	d, Lincoln, R. I.
Michael Shepard	Director	92 Sheffield	Ave., Pawtucket, R. I.
,	Director		
	Director	and the second	
Leonard Shaftan			
Joseph Shepard	Vice Presid	lent (Same	as above)
Michael Shepard	Secretary		33 above,
Michael Shepard	Treasurer		
SEVENTH: The aggreg	gate number of si es, shares withou	hares which it has au t par value, and series	thority to issue, itemized , if any, within a class, is:
•			Par Value per Share or Statement that
Number of Shares	Class	Series	Shares are without Par Value
300	Common		No Par Value

MES ST COL

FORM 31 30M 9-7

Eighth: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	Series	Par Value per Share or Statement that Shares are without Par Value
100	Common		No Par Value

Dated February 23 , 1973

Lenox Chemical Company

Ita Secretary

108 10-73 346 1/2 13.11 1300 x # 15.00