



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. 96416		2. Name of Corporation Lizjoe, Inc.			
3. Street Address Principal Business Office 4 Pinegrove Circle			City Smithfield	State RI	Zip 02828
4. Business Phone No. 401-949-0099		5. State of Incorporation RHODE ISLAND			6. SIC Code 7435
7. Brief Description of the Character of Business Conducted in Rhode Island TO PROVIDE LAUNDRY CLEANING SERVICES.					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Norman C. Tashash			Vice President Name		
Street Address Same as above			Street Address		
City	State	Zip	City	State	Zip
Secretary Name Norman C. Tashash			Treasurer Name Norman C. Tashash		
Street Address Same as above			Street Address Same as above		
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			Director Name		
Street Address			Street Address		
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) <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
8,000 NO PAR VALUE			100		no par

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



File Date **FILED**
Check No. **FEB 08 2005**
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.
Norman G Tashash 1/30/05
Signature of Officer Date
Norman G Tashash
Print or Type Name of Officer
President
Title of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004
Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 96416 2. Name of Corporation Lizjoe, Inc.
3. Street Address Principal Business Office 4 Pinegrove Circle City Smithfield State RI Zip 02828
4. Business Phone No. 401-232-0340 5. State of Incorporation Rhode Island 6. SIC Code 7435

7. Brief Description of the Character of Business Conducted in Rhode Island
To provide laundry cleaning services and any other lawful purpose

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

President Name <u>Norman C. Tashash</u>	Vice President Name <u>Norman C. Tashash</u>
Street Address <u>4 Pinegrove Circle</u>	Street Address <u>Same</u>
City <u>Smithfield</u> State <u>RI</u> Zip <u>02828</u>	City <u> </u> State <u> </u> Zip <u> </u>
Secretary Name <u>Norman C. Tashash</u>	Treasurer Name <u>Norman C. Tashash</u>
Street Address <u>Same</u>	Street Address <u>Same</u>
City <u> </u> State <u> </u> Zip <u> </u>	City <u> </u> State <u> </u> Zip <u> </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> </u>
Street Address <u> </u>	Street Address <u> </u>
City <u> </u> State <u> </u> Zip <u> </u>	City <u> </u> State <u> </u> Zip <u> </u>
Director Name <u> </u>	Director Name <u> </u>
Street Address <u> </u>	Street Address <u> </u>
City <u> </u> State <u> </u> Zip <u> </u>	City <u> </u> State <u> </u> Zip <u> </u>

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

AUTHORIZED SHARES	Class/Series	Par Value
Number of Shares		
<u>8,000</u>	<u>Common</u>	<u>no par value</u>

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

ISSUED SHARES	Class/Series	Par Value
Number of Shares		
<u>100</u>	<u>Common</u>	<u>no par</u>

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 correct.

Norman Tashash 2/11/04
Signature of Officer Date
Norman Tashash
Print or Type Name of Officer
President
Title of Officer

File Date: FILED FEB 20 2004
Check No.:
By:
FOR SECRETARY OF STATE USE ONLY



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **96416** 2. Name of Corporation **Lizjoe, Inc.**
3. Street Address Principal Business Office **4 Pinegrove Circle** City **Smithfield** State **RI** Zip **02828**
4. Business Phone No. **401-232-0340** 5. State of Incorporation **Rhode Island** 6. SIC Code **7435**

7. Brief Description of the Character of Business Conducted in Rhode Island
To provide laundry cleaning services and any other lawful purpose

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

President Name Norman C. Tashash			Vice President Name Norman C. Tashash		
Street Address 4 Pinegrove Circle			Street Address Same		
City Smithfield	State RI	Zip 02828	City Same	State State	Zip Zip
Secretary Name Norman C. Tashash			Treasurer Name Norman C. Tashash		
Street Address Same			Street Address Same		
City City	State State	Zip Zip	City City	State State	Zip Zip

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

Director Name None			Director Name		
Street Address			Street Address		
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)

AUTHORIZED SHARES	Class/Series	Par Value
Number of Shares		
8,000	Common	no par value

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

ISSUED SHARES	Class/Series	Par Value
Number of Shares		
100	Common	no par

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

FILED

File Date: **FEB 20 2004**

Check No.: **By [Signature] 2/20/04**

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.

Norman Tashash 2/11/04
Signature of Officer Date

Norman Tashash
Print or Type Name of Officer

President
Title of Officer



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. **96416** 2. Name of Corporation **Lizjoe, Inc.**
3. Street Address Principal Business Office **4 Pinegrove Circle** City **Smithfield** State **RI** Zip **02828**
4. Business Phone No. **401-232-0340** 5. State of Incorporation **Rhode Island** 6. SIC Code **7435**

7. Brief Description of the Character of Business Conducted in Rhode Island
To provide laundry cleaning services and any other lawful purpose

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

President Name Norman C. Tashash			Vice President Name Norman C. Tashash		
Street Address 4 Pinegrove Circle			Street Address Same		
City Smithfield	State RI	Zip 02828	City Same	State RI	Zip 02828
Secretary Name Norman C. Tashash			Treasurer Name Norman C. Tashash		
Street Address Same			Street Address Same		
City Smithfield	State RI	Zip 02828	City Same	State RI	Zip 02828

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)

AUTHORIZED SHARES		
Number of Shares	Class/Series	Par Value
8,000	Common	No par value

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

ISSUED SHARES		
Number of Shares	Class/Series	Par Value
100	Common	no par

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

FILED

File Date: **FEB 20 2004** 10:11 AM '04

Check No.: **By MA 210 58 GAN**

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.

Norman Tashash 2/11/04
Signature of Officer Date

Norman Tashash

Print or Type Name of Officer

President

Title of Officer



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. 96416 2. Name of Corporation Lizjoe, Inc.
3. Street Address Principal Business Office 4 Pinegrove Circle City Smithfield State RI Zip 02828
4. Business Phone No. 401-232-0340 5. State of Incorporation Rhode Island 6. SIC Code 7435

7. Brief Description of the Character of Business Conducted in Rhode Island
To provide laundry cleaning services and any other lawful purpose

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

President Name <u>Norman C. Tashash</u>	Vice President Name <u>Norman C. Tashash</u>
Street Address <u>4 Pinegrove Circle</u>	Street Address <u>Same</u>
City <u>Smithfield</u> State <u>RI</u> Zip <u>02828</u>	City _____ State _____ Zip _____
Secretary Name <u>Norman C. Tashash</u>	Treasurer Name <u>Norman C. Tashash</u>
Street Address <u>Same</u>	Street Address <u>Same</u>
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 <u>None</u>	Director Name
Street Address	Street Address
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)

AUTHORIZED SHARES		
Number of Shares	Class/Series	Par Value
<u>8,000</u>	<u>Common</u>	<u>No par value.</u>

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

ISSUED SHARES		
Number of Shares	Class/Series	Par Value
<u>100</u>	<u>Common</u>	<u>No par</u>

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

File Date: 10-16-01
1554
Check No.: _____
2
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.

Lizjoe, Inc. Norman Tashash
Signature of Officer Date 10/11/01
Norman Tashash
Print or Type Name of Officer
President
Title of Officer



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. **96416** 2. Name of Corporation **Lizjoe, Inc.**

3. Street Address Principal Business Office City State Zip
2 Pinegrove Circle **Greenville** **RI** **02828**
 4. Business Phone No. 5. State of Incorporation
401-232-0340 **RHODE ISLAND**
 6. SIC Code
7435

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

To provide laundry cleaning services and for the transaction of any or all other purposes

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

President Name			Vice President Name		
Norman C. Tashash			Norman C. Tashash		
Street Address			Street Address		
2 Pinegrove Circle			2 Pinegrove Circle		
City	State	Zip	City	State	Zip
Greenville	RI	02828	Greenville	RI	02828
Secretary Name			Treasurer Name		
Norman C. Tashash			Norman C. Tashash		
Street Address			Street Address		
2 Pinegrove Circle			2 Pinegrove Circle		
City	State	Zip	City	State	Zip
Greenville	RI	02828	Greenville	RI	02828

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

Director Name			Director Name		
None			None		
Street Address			Street Address		
None			None		
City	State	Zip	City	State	Zip
Director Name			Director Name		
None			None		
Street Address			Street Address		
None			None		
City	State	Zip	City	State	Zip

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

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value
8,000	NO PAR VALUE	

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

ISSUED SHARES

Number of Shares	Class/Series	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



* 9 6 4 1 6 *

File Date: 4/25/00

Check No.: 1333

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] 4/20/00
Signature of Officer Date

Norman C. Tashash
Print or Type Name of Officer

President
Title of Officer



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. **96416** 2. Name of Corporation **Lizjoe, Inc.**

3. Street Address Principal Business Office City State Zip
2 Pinegrove Circle **Greenville** **R.I.** **02828**

4. Business Phone No. **949-0099** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **7435**

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

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

President Name Norman G. Tashash	Vice President Name Norman G. Tashash
Street Address 2 Pinegrove Circle	Street Address 2 Pinegrove Circle
City State Zip Greenville R.I. 02828	City State Zip Greenville R.I. 02828
Secretary Name Norman G. Tashash	Treasurer Name Norman G. Tashash
Street Address 2 Pinegrove Circle	Street Address 2 Pinegrove Circle
City State Zip Greenville R.I. 02828	City State Zip Greenville R.I. 02828

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
None	None
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
8,000 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



File Date: 04-02-99
Check No.: 982
By: [Signature]

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.

Norman Tashash 3/31/99
Signature of Officer Date

Norman Tashash
Print or Type Name of Officer

President
Title of Officer

**ACTION BY UNANIMOUS CONSENT
OF THE STOCKHOLDERS OF
LIZJOE, INC.**

Greenville, RI
December 31, 1999

The undersigned, constituting all of the stockholders of LIZJOE, INC., entitled to vote at a meeting of the stockholders for the purposes of the Corporation, hereby waive necessity for a meeting of the stockholders, pursuant to the authority to do so conferred by Rhode Island General Law, Section 7-1.1-30.3, and do hereby consent to the following in lieu of an annual meeting:

RESOLVED: That the following persons be and they hereby are elected to the offices set opposite their respective names to serve until resignation, removal, or death or until their respective successors are duly elected and qualified.

President: Norman C. Tashash
Vice President: Norman C. Tashash
Treasurer: Norman C. Tashash
Secretary: Norman C. Tashash

RESOLVED: That all the lawful actions of the officers of the Corporation taken within the scope of their duties on behalf of the Corporation since the last annual meeting be and hereby are confirmed and ratified.

This writing shall be filed with the records of the minutes of the meetings of the stockholders of the Corporation and shall, for all purposes, be treated as a vote taken at a meeting.


Norman C. Tashash, Stockholder



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. **96416** 2. Name of Corporation **Lizjoe, Inc.**

3. Street Address Principal Business Office
2 Pinegrove Circle

City **Smithfield** State **RI**

Zip **02828**

4. Business Phone No.
232-0340

5. State of Incorporation
RHODE ISLAND

6. SIC Code
7435

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

Dry cleaning and laundry services

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

President Name

Norman Tashash

Street Address

2 Pinegrove Circle

City

State

Zip

Smithfield RI 02828

Secretary Name

Norman Tashash

Street Address

2 Pinegrove Circle

City

State

Zip

Smithfield RI 02828

Vice President Name

Norman Tashash

Street Address

2 Pinegrove Circle

City

State

Zip

Smithfield RI 02828

Treasurer Name

Norman Tashash

Street Address

2 Pinegrove Circle

City

State

Zip

Smithfield RI 02828

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

Director Name

none

Street Address

City

State

Zip

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

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

8,000 NO PAR VALUE

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

ISSUED SHARES

Number of Shares

Class/Series

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



* 9 6 4 1 6 *

File Date: 2.23.98

Check No.: 695

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] 2/12/98
Signature of Officer Date

Norman Tashash
Print or Type Name of Officer

President
Title of Officer

ACTION BY UNANIMOUS CONSENT
OF THE STOCKHOLDERS OF
LIZJOE, INC.

Smithfield, RI
December 31, 1997

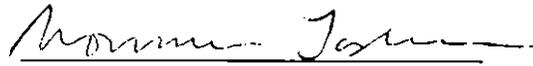
The undersigned, constituting all of the stockholders of LIZJOE, INC., entitled to vote at a meeting of the stockholders for the purposes of the Corporation, hereby waive the necessity for a meeting of the stockholders, pursuant to the authority to do so conferred by Rhode Island General Law, Section 7-1.1-30.3, and do hereby consent to the following in lieu of an annual meeting:

RESOLVED: That the following persons be and they hereby are elected to the offices set opposite their respective names to serve until resignation, removal, or death or until their respective successors are duly elected and qualified.

President: Norman Tashash
Vice President: Norman Tashash
Treasurer: Norman Tashash
Secretary: Norman Tashash

RESOLVED: That all the lawful actions of the officers of the Corporation taken within the scope of their duties on behalf of the Corporation since the last annual meeting be and hereby are confirmed and ratified.

This writing shall be filed with the records of the minutes of the meetings of the stockholders of the Corporation and shall, for all purposes, be treated as a vote taken at a meeting.


Norman Tashash, Stockholder