



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. 97317		2. Name of Corporation inside & out, inc.			
3. Street Address Principal Business Office 60 WENDY LANE			City WAKEFIELD	State RI	Zip 02879
4. Business Phone No. (401) 222-2222 789-0569		5. State of Incorporation RHODE ISLAND		6. SIC Code 7476	
7. Brief Description of the Character of Business Conducted in Rhode Island BUSINESS OF CONDUCTING AND PERFORMING YARD WORK, CLEANING AND MAINTENANCE INSIDE AND OUTSIDE OF RESIDENTIAL AND COMMERCIAL ESTABLISHMENTS AS WELL AS BOATS AND AUTOMOBILES.					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name ELAINE SEWATSKY			Vice President Name BARB SILVA		
Street Address 21 BOW RUN			Street Address 60 WENDY LANE		
City SAUNDERSTOWN	State RI	Zip 02874	City WAKEFIELD	State RI	Zip 02879
Secretary Name NONE			Treasurer Name NONE		
Street Address			Street Address		
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			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
200 NO PAR VALUE			NONE		

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



File Date: 1/4/05
Check No.: 1072
By: W.
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.

Elaine Sewatsky 1/2/04
Signature of Officer Date
ELAINE SEWATSKY
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 OR PRINTED IN BLACK)

1. Corporate ID No. 97317		2. Name of Corporation inside & out, inc.			
3. Street Address Principal Business Office 60 WENDY LANE			City WAKEFIELD	State RI	Zip 02879
4. Business Phone No. 401 789 0569		5. State of Incorporation RHODE ISLAND			6. SIC Code 7476
7. Brief Description of the Character of Business Conducted in Rhode Island BUSINESS OF CONDUCTING AND PERFORMING YARD WORK, CLEANING AND MAINTENANCE INSIDE AND OUTSIDE OF RESIDENTIAL AND COMMERCIAL ESTABLISHMENTS AS WELL AS BOATS AND AUTOMOBILES.					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name ELAINE SEWATSKY			Vice President Name BARB SILYA		
Street Address 21 BOW RUN			Street Address 60 WENDY LANE		
City SAUNDERSTOWN	State RI	Zip 02874	City WAKEFIELD	State RI	Zip 02879
Secretary Name NONE			Treasurer Name NONE		
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		
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
AUTHORIZED SHARES			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
200	NO PAR VALUE		NONE		

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



* 9 7 3 1 7 *

File Date _____
Check No. **FILED**
By: JAN 05 2004
FOR SECRETARY OF STATE USE ONLY
BY ISAAC CAN

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.

Elaine Sewatsky 1/1/04
Signature of Officer Date
ELAINE SEWATSKY
Print or Type Name of Officer
PRESIDENT
Title of Officer



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. **97317** 2. Name of Corporation **inside & out, inc.**
3. Street Address Principal Business Office **60 WENDY LANE** City **WAKEFIELD** State **RI** Zip **02879**
4. Business Phone No. **401 789 0569** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **7476**

7. Brief Description of the Character of Business Conducted in Rhode Island
JANITORIAL RELATED SERVICE / LANDSCAPE MAINTENANCE

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

President Name ELAINE SEWATSKY	Vice President Name BARB SILVA
Street Address 21 BOW RUN	Street Address 60 WENDY LANE
City SAUNDERSTOWN RI Zip 02874	City WAKEFIELD RI Zip 02879
Secretary Name NONE	Treasurer Name NONE
Street Address	Street Address
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	Director Name
Street Address	Street Address
City State Zip	City State Zip

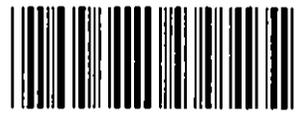
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES
Number of Shares Class/Series Par Value
200 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



* 9 7 3 1 7 *

File Date: 1-14-03
Check No.: 1034
By: EL

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.

Elaine Sewatsky /11/03
Signature of Officer Date
PREZ ELAINE SEWATSKY
Print or Type Name of Officer
ELAINE SEWATSKY
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. **97317** 2. Name of Corporation **inside & out, inc.**
3. Street Address Principal Business Office **60 WENDY LANE** City **WAKEFIELD** State **RI** Zip **02879**
4. Business Phone No. **401 789 0569** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **7476**

7. Brief Description of the Character of Business Conducted in Rhode Island
JANITORIAL + RELATED SERVICE / LANDSCAPE MAINTENANCE

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

President Name ELAINE SEWATSKY	Vice President Name BARB SILVA
Street Address 21 BOW RUN	Street Address 60 WENDY LANE
City SAUNDERSTOWN RI Zip 02874	City WAKEFIELD RI Zip 02879
Secretary Name NONE	Treasurer Name NONE
Street Address	Street Address
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

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

AUTHORIZED SHARES	Class/Series	Par Value
200 NO PAR VALUE		

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

ISSUED 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


* 9 7 3 1 7 *
File Date: 1-14-02
Check No.: 1018
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.

Elaine Sewatsky 1/10/02
Signature of Officer Type
PREZ ELAINE SEWATSKY
Print or Type Name 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. **97317** 2. Name of Corporation **inside & out, inc.**

3. Street Address Principal Business Office
60 WENDY LANE City **WAKEFIELD** State **RI** Zip **02879**

4. Business Phone No. **401 789 0569** 5. State of Incorporation **RHODE ISLAND** 6. **7898**

7. Brief Description of the Character of Business Conducted in Rhode Island
JANITORIAL + RELATED SERVICE / LANDSCAPE MAINTENANCE

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

President Name ELAINE SEWATSKY	Vice President Name BARB SILVA
Street Address 21 BOW RUN	Street Address 60 WENDY LANE
City State Zip SAUNDERSTOWN RI 02874	City State Zip WAKEFIELD RI 02879
Secretary Name NONE	Treasurer Name NONE
Street Address	Street Address
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	Director Name
Street Address	Street Address
City State Zip	City State Zip

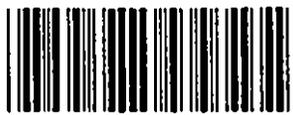
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)
AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value
200	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



* 9 7 3 1 7 *

File Date: 1/9
223
Check No.:
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.

[Signature] 1/6/01
Signature of Officer Date

PREZ ELAINE SEWATSKY
Print or Type Name of Officer

Title of Officer



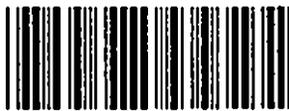
PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.		2. Name of Corporation			
97317		inside & out, inc.			
3. Street Address Principal Business Office			City	State	Zip
60 WENDY LANE			WAKEFIELD	RI	02874
4. Business Phone No.		5. State of Incorporation		6. SIC Code	
401 789 0569		RHODE ISLAND		7476	
7. Brief Description of the Character of Business Conducted in Rhode Island					
SANITIZIAL + RELATED SERVICE / LANDSCAPE MAINTENANCE					
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT)			FILL IN SPACES BEFORE USING ATTACHMENTS		
President Name		Vice President Name			
ELAINE SEWATSKY		BARB SILVA			
Street Address		Street Address			
21 BOW RUN		60 WENDY LANE			
City	State	City	State	Zip	
JAUNDERSTOWN	RI	WAKEFIELD	RI	02874	
Secretary Name		Treasurer Name			
NONE		NONE			
Street Address		Street Address			
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		Director Name			
NONE		NONE			
Street Address		Street Address			
City		City			
State		State			
Zip		Zip			
Director Name		Director Name			
Street Address		Street Address			
City		City			
State		State			
Zip		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
200	NO	PAR VALUE	NONE		

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



* 9 7 3 1 7 *

File Date: 2/4/00
Check No.: 169
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.

[Signature] 2/1/00
Signature of Officer Date
PREZ ELAINE SEWATSKY
Print or Type Name 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. **97317** 2. Name of Corporation **Inside & out, Inc.**
3. Street Address Principal Business Office **60 WENDY LANE** City **WAKEFIELD** State **RI** Zip **02879**
4. Business Phone No. **401-789-0569** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **7478**

7. Brief Description of the Character of Business Conducted in Rhode Island
JANITORIAL + RELATED SERVICE / LANDSCAPE MAINTENANCE

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

President Name ELAINE SEWATSKY	Vice President Name BARB SILVA
Street Address 21 BOW RUN	Street Address 60 WENDY LANE
City SAUNDERSTOWN State RI Zip 02874	City WAKEFIELD State RI Zip 02879
Secretary Name NONE	Treasurer Name NONE
Street Address	Street Address
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 NONE
Street Address	Street Address
City	City
State	State
Zip	Zip
Director Name	Director Name
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
200 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



* 9 7 3 1 7 *

File Date: 1-11-99
Check No.: 132
By: AMF

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.

Elaine Sewatsky Jan 3 '99
Signature of Officer
ELAINE SEWATSKY
Print or Type Name of Officer
PRESIDENT
Title of Officer



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. **97317** 2. Name of Corporation **Inside & out, Inc.**
3. Street Address Principal Business Office **60 WENDY LANE** City **WAKEFIELD** State **RI** Zip **02879**
4. Business Phone No. **401-789-0569** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **7476**

7. Brief Description of the Character of Business Conducted in Rhode Island
JANITORIAL + RELATED SERVICE / LANDSCAPE MAINTENANCE

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

President Name ELAINE SEWATSKY	Vice President Name BARB SILVA
Street Address 21 BOW RUN	Street Address 60 WENDY LANE
City SAUNDERSTOWN State RI Zip 02874	City WAKEFIELD State R.I Zip 02879
Secretary Name NONE	Treasurer Name NONE
Street Address NONE	Street Address NONE
City NONE State NONE Zip NONE	City NONE State NONE Zip NONE

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

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
200 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



File Date: 1.20.98
Check No.: 107
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.

Elaine Sewatsky Jan 2 '98
Signature of Officer Date
ELAINE SEWATSKY
Print or Type Name of Officer
PRESIDENT
Title of Officer