

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

Corporations Division 100 North Main Street Providence, RI 02903-1335 2.3040

Matthet	v A. Brown, Secretary of State		401.22.
PROFIT COR	PORATION ANNUAL REPORT FOR THE YEAR	2005	
Filing Period: January			
(FORM MUST BE TYPED OF	R PRINTED IN BIACK)		
1. Corporate ID No.	2. Name of Corporation		
93019	NORTHEAST INTERIOR SYSTEMS, INC.		

1. Corporate ID No. 93019	2. Name of Corporation NORTHEAST IN	TERIOR SYSTEMS, INC			
3 Street Address Principal Business O	1	<u> </u>	<del></del>	Leura	7/0
1042 Route 14	6. 70 Box	809	Cliston Park	State	12065
4 Business Phone No	•	5. State of Incorporation	•	·	6. SIC Code
(518) 371-408	2	NEW YORK			8888
7 Brief Description of the Chamicter of PURCHASE, RESELL A		L AND LABORATORY C	CABINETRY AND FURNITURE.		
8. NAMES AND ADDRESSES	OF THE OFFICERS.	/*Y" DOY COD 47T/	ACHIARATE	CEC DEFORE HEISIC	TTACUMENTO
Pasident Name	OF THE OFFICERS:	(A BOA FOR ATTA	Vice President Name	CES BEFORE USING A	(TACHMENTS
Best W. Bounde	: <b>1</b> \		Jonathan Las	st.	
Street Address			Street Address	<u> </u>	
306 Highland	QUB.		7568 GREEN T	Bough Cizal	<del>D</del>
Warwick	RI	03886	Paldwinsville	State N.Y	13027
Secretary Name		. X X . X	Treasurer Name		
Theresa Lupi	netti		Lisa FREMO	<u>ch</u>	
Street Address			Street Address	1. X_	
	NE	<del>-</del>	8046B Maz	LINIR	<del></del>
Clifton Park	State NY	12065	Clay	State NY	13041
9. NAMES AND ADDRESSES	OF THE DIRECTOR	S: ("X" BOX FOR AT	TACHMENT)       FILL IN S	PACES BEFORE USING	ATTACHMENTS
Director Name	٨		Director Name		
Robert W. Br	wden				
Street Address			Street Address		
30 attacks -	Trail				
Chathan	Sinie M VA	гір 03633	City	State	Zip
Director Name	r1y.č.kg	$\int \phi \phi \Delta J$	Director Name		
77716777 73(17)6			Director Prime		
Street Address	<del> </del>	<del></del> -	Street Address		
			• OFFICE ASSESSED.		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED (	 "X" BOX FOR ATT/	 ACHMENT)	11. SHARES ISSUED ("X ISSUED SHARES	 " BOX FOR ATTACHM	 ENT) []
Number of Shares	Class/Series	Par Value	Number of Shares	Class Series	Par Value
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LIZOU GOMMI NO PAR VALUI	<b>.</b>		2090	AB	NO
<del> </del>	<del></del> -	<u></u>		1	
	<b>_</b>		<u> </u>		
This report must be si	igned in ink by cith	er the President, Vice P	President, Secretary, Assistant 5	Secretary, Treasurer, Re	ceiver or Trustee
•	•		•	• • • • • • • • • • • • • • • • • • • •	
	<b>8188</b> [[]]] <b>8818</b> 1    <b>818</b>	1 111			
		<b>                                </b>			j
		31 ( <b>155</b> )			The state of the s

	*93019*	
File Date	FILED 16/015287	
Check No	SECRETARY OF STATE USE ONLY	

Under penalty of perjury. I declare and affirm t	hat I have examined this report,
ncluding any accompanying schedules and sta	tements, and that all statements
contained herein are true and correct.	, 1
Tua French	3/14/05
ignature of Officer	
Lisa Franch	
Print or Type Name of Officer	
TREASUZER	
Title of Officer	



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004
Filing Period: January 1 - March 1 • Filing Fee: \$50.00 FORM MIIST RE TYPED IN RI ACK)

I. Corporate ID No.	2. Name of Corpor					
93019	NORTHEAS	T INTERIOR SYSTE	EMS, INC.			
3. Street Address Principal	Business Office		City	State	Zip	
1 OLD ROUTE 146	5, PO BOX 809		CLIFTON PARK	NY	12065	
4. Business Phone No.		5. State of Incorpora	non		6 SIC Code	
5183714080		NEW YORK			8888	
7. Brief Description of the C PURCHASE, RESELL			RY CABINETRYAND FURNITU	JRE.		
	RESSES OF THE OFF	ICERS ("X" BOX FOR	ATTACHMENT) 🗌 FILL IN SPA	CES BEFORE USING A	FTACHMENTS /	
President Name			Vice President Name			
Bert W. Bowden			.Jonathan Last			
Street Address			Street Address	011		
206 Highland Av			.7568 Green Bough		19:	
City	State	Zip	City	State	Zip	
Warwick	RI	02886	Baldwinsville Treasurer Name	NY NY	13027	
ecretary Name	<b>.</b> :		Lisa French			
Theresa Lupinet	<u> </u>		<u></u>			
Street Address 3 Putnam Lane	Pret Address 3. Putnam Lane		130 North 2nd Av	'Street Address 130 North 2nd Ave		
City	State	Zip	'City	State	Zip	
Clifton Park,	NY	12065	. Mechanicville	NY	12118	
	RESSES OF THE DIR	ECTORS ("X" BOX FO	OR ATTACHMENT) T FILL IN SE		ATTACHMENTS	
Director Name		ECTORS ("X" BOX FO	DRATTACHMENT)   FILL IN SF Director Name		ATTACHMENTS	
Director Name Robert W. Bowde	en	ECTORS ("X" BOX FO	OR ATTACHMENT) T FILL IN SE		ATTACHMENTS	
Director Name Robert W. Bowde Street Address 30 Attucks Trai	en	ECTORS ("X" BOX FO	DRATTACHMENT)   FILL IN SF Director Name		ATTACHMENTS 2	
Director Name Robert W. Bowde Street Address 30 Attucks Trai	en 1		DR ATTACHMENT)   FILL IN SE Director NameStreet Address	ACES BEFORE USING		
Director Name  Robert W. Bowde  Street Address  30 Attucks Trai  City  Chatham	n 1  State	Zip	DR ATTACHMENT)   FILL IN SE Director NameStreet Address	ACES BEFORE USING		
Director Name  Robert W. Bowde  Street Address  30 Attucks Trai  City  Chatham  Director Name	n 1  State	Zip	DR ATTACHMENT)   FILL IN SE Director Name Street Address City	ACES BEFORE USING		
Director Name Robert W. Bowde Street Address 30 Attucks Trai City Chatham Director Name	1 State MA	7 <i>ip</i> 02633	OR ATTACHMENT) FILL IN SE Director Name Street Address City Director Name Street Address	State	Zip	
Director Name  Robert W. Bowde  Street Address  30 Attucks Trai  City  Chatham  Director Name	n 1  State	Zip	OR ATTACHMENT)   FILL IN SE Director Name Street Address City Director Name	ACES BEFORE USING		
Director Name  Robert W. Bowde  Street Address  30 Attucks Trai  City  Chatham  Director Name  Street Address  City	State    State   MA   State   State	Zip 02633	OR ATTACHMENT)   FILL IN SE Director Name Street Address City Director Name Street Address City City	State  State	Zip Zip	
Director Name  Robert W. Bowde  Street Address  30 Attucks Trai  City  Chatham  Director Name  Street Address  City  10. SHARFS AUTHO	State    State   MA   State   State	Zip 02633	Director Name  Street Address  City  Director Name  City  The Control of the Control of the City  Street Address  City  11. SHARES ISSUED ("X"	State  State	Zip Zip	
Director Name  Robert W. Bowde  Street Address  30 Attucks Trai  City  Chatham  Director Name  Street Address  City  10. SHARES AUTHO  AUTHORIZED SHARES	State    State   MA   State   State	Zip 02633	OR ATTACHMENT)   FILL IN SE Director Name Street Address City Director Name Street Address City City	State  State	Zip Zip	
Director Name Robert W. Bowde Street Address 30 Attucks Trai City Chatham Director Name Street Address City 10. SHARES AUTHO AUTHORIZED SHARES Number of Shares	State    State   MA     State   State     RIZED ("X" BOX FOR     Class/Series	Zip	Director Name  Street Address  City  Director Name  Street Address  City  Street Address  Number of Shares	State  State  State  Class/Series	Zip  Zip  VI) □  Par Value	
Director Name  Robert W. Bowde Street Address 30 Attucks Trai City Chatham Director Name Street Address City 10. SHARFS AUTHO AUTHORIZED SHARES	State    State   MA     State   State     RIZED ("X" BOX FOR     Class/Series	Zip	Director Name  Street Address  City  Director Name  Street Address  City  ISHARES ISSUED ("X"	State  State  State	Zip	
Director Name Robert W. Bowde Street Address 30 Attucks Trai City Chatham Director Name Street Address City 10. SHARES AUTHO AUTHORIZED SHARES Number of Shares	State    State   MA     State   State     RIZED ("X" BOX FOR     Class/Series	Zip	Director Name  Street Address  City  Director Name  Street Address  City  Street Address  Number of Shares	State  State  State  Class/Series	Zip  Zip  VI) □  Par Value	

*93019 F	BC 02/29/04 19:01	1;03 AM*
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Check No.	1010109	55
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FOR SECRE	TARY OF STATE USE	ONLY

Under penalty of perjury, I declare an	d affirm that I have examined
this report, including any accompanyi	
and that all statements contained here	in are true and correct.
Jusa Franch	2/20/04
Signature of Officer	Date
Lisa French	
Print or Type Name of Officer	
Treasurer	
Title 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

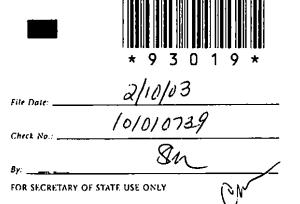
## PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003 Filing Period: January 1-March 1 • Filing Fee: \$50.00

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STOP PLEASE READ INSTRUCTIONS

FORM MUST BE TITED OR PRINTE	ED IN BLACK)				
. Corporate ID No.	2. Name of Corporation				
93019	NORTHEAST II	NTERIOR SYSTEMS, INC	•		
R. Street Address Principal Business (	Office		City	State	Zip
1 Old Route 146, B. Business Phone No.	PO Box 809	5. State of Incorporation	Clifton Park	NY	12065 6. SIC Code
(518) 371-4080 7. Brief Description of the Character	of Rusiness Conducted in Ri	NEW YORK			8888
Sales and instal.  B. NAMES AND ADDRESS  Tresident Name			MENT) FILL IN SPACES BEFO	DRE USING ATTACH	IMENTS
Bert Bowden			David Clark Street Address		
206 Highland Ave			4 Walsh Lane		
Sity	State	Zip	City	State	Zip
Warwick Secretary Name	RI	02886	Clifton Park Treasurer Name	NY	12065
Tracy L. Decknich	k		Jonathan Last Street Address		
95 Wineberry Driv	ve		7568 Green Bough	Circle	
Sity	State	Zip	City	State	Zip
Ballston Spa  9. NAMES AND ADDRESS  Director Name	NY SES OF THE DIREC	12020 TORS (*X* BOX FOR ATTA	Baldwinsville CHMENT) FILL IN SPACES BE Director Name	NY EFORE USING ATTA	13027 CHMENTS
Robert Bowden Street Address			Street Address		
30 Attucks Trail	State	Zip	City	State	Zip
Chatham Director Name	MA	02633	Director Name		
Street Address			Street Address		
Сиу	State	Zip	City	State	Zip
10. SHARES AUTHORIZEI Authorized Shares	D (*X* BOX FOR ATTACI	IMENT)	11. SHARES ISSUED (*X* BO	OX FOR ATTACHMENT)	
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
200 NO PAR VALUE	A Common	no	110	A Common	no
2000	R Common	no	1980	R Common	no

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.

Signature of Officer

Print of Type Name of Officer

Title of Officer

Form 630 12/02



Corporations Division
Phone 401-222-3040

Fax 161-222-1369

corporations discensiale reus-

Notary C. Transmarks Prone 401-222-148\*

Fax - 101-222-1879

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ICC

Phone (01-222-3049)

Tax 301-222-353

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e30 North Nam Street Proadence RI 02903

## STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State / Corporations Division

Matthew A. Brown Secretary of State

May 24, 2003

Bert Bowden, President Northeast Interior Systems, Inc. 1 Old Rte. 146 PO Box 809 Clifton Park, NY 12065

Re:

ID 93019

NORTHEAST INTERIOR SYSTEMS, INC.

Dear Mr. Bowden:

On February 10, 2003, this office accepted for filing the 2003 annual report for the above-named corporation. It has come to our attention that the corporation made an adjustment to its authorized shares.

The annual report is not the vehicle in which to record a change in authorized shares. If the corporation has *increased* its authorized share, an Amended Certificate of Authority must be filed with this office. However, if the corporation has reduced the number of its authorized shares, Evidence of Amendment must be formally recorded.

Enclose you will find the forms and/or instruction sheet outlining the required filing procedure. If you have any questions, please feel free to contact the undersigned.

Sincerely,

CORPORATIONS DIVISION

Maureen E. Ewing

Assistant to the Director

Enc.

Office of the Secretary of State

Mate House koom 217 Providence, KL02003

timbe (101-222-2357) (1017-101-222-1356) (173-714)

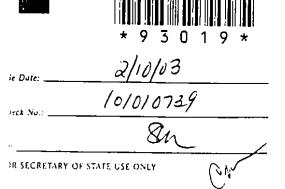
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Edward S. Inman, III, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

## PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003 Filing Period: January 1-March 1 • Filing Fee: \$50,00

Corparate ID No. 93019	2. Name of Corporatio		_		
33013 Street Address Principal Busine	NUKTHEAST :	NTERIOR SYSTEMS, INC	City	State	
1 Old Route 146 Business Phone No.	, PO Box 809	S. State of Incorporation	_Clifton Park	NY	Zip 12065 6. SIC Code
(518) 371–4080 Brief Description of the Charact	ter of Business Conducted in 1	NEW YORK			8888
Sales and insta NAMES AND ADDRE		net casework ERS (*x* BOX FOR ATTACH	(MENT) FILL IN SPACES BEE	ORE USING ATTAC	HMENTS
Bert Bowden			David Clark		
206 Highland Av			4 Walsh Lane		
y 	State	Ziρ	City	State	Zip
Warwick retary Name	RI	02886	Clifton Park Treasurer Name	NY	12065
Tracy L. Deckni			Jonathan Last Street Address		
95 Wineberry Dr	ive State	Zip	7568 Green Bough	Circle State	Zıp
Ballston Spa NAMES AND ADDRE ector Nume	NY SSES OF THE DIREC	12020 TORS ("X" BOX FOR ATTAI	Baldwinsville CHMENT) FILL IN SPACES B  Duector Name	NY E <b>FORE USING ATT</b> A	13027
Robert Bowden			Street Address		
30 Attucks Trai	1				
,	State	Zip	City	State	Zip
Chatham ector Name	MA	02633	Director Nume		Ξ.γ
et Address			Sticet Address		
,	State	Zip	City	State	Z:p
	ED ("X" BOX FOR ATTACI	IMENT)	11. SHARES ISSUED (*X* 8	OX FOR ATTACHMENT	)
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SHARES AUTHORIZI THORIZED SHARES riber of Shares	Class/Series	Par Value		CIA32/36LIG2	Par Value
HORIZED SHARES niber of Shares		Par Value	·		
HORIZED SHARES	Class/Series A Common	Par Value	110	A Common	no 



Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and

Title of Officer

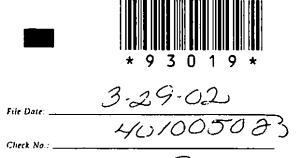
Edward S. Inman, III, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

### PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR <u>2002</u>

STOR SIPICASE READY

Filing Period: January 1	l-March 1 •	Filing Fee: \$50.00			INSTR
FORM MUST BE TYPED IN BLAC	K)				
I. Corporate ID No.	2. Name of Corporation	on .		•	_
93019	NORTHEAST	INTERIOR SYSTEMS, INC	<b>C</b> .	:	
1. Street Address Principal Business O	ffice		City	State	Zip
1 Old Route 146, Po 1. Business Phone No.	O Box 809,	5. State of Incorporation	Clifton Park	NY	12065 6. SIC Code
(518) 371–4080 Thief Description of the Character of	f Business Conducted in .	NEW YORK Rhode Island			8888
Sales and Installa B. NAMES AND ADDRESSI President Nume			IMENT) FILL IN SPACES BEF Vice President Name	ORE USING ATTACHM	ENTS
Bert W. Bowden  treet Address		· .	David Clark Street Address		
206 Highland Ave.	State	Zip	4 Walsh Lane	State	21p
Warwick. ecretary Nume	RI	02886	Clifton Park Trensurer Name	NY	12065
Tracy L. Decknick			Jonathan Last Street Address		
95 Wineberry Drive	State	Zip	3157 Hidden Lake	Drive State	Zip
Ballston Spa, D. NAMES AND ADDRESSI Director Name	NY ES OF THE DIREC	12020 CTORS (*x* box for atta	Baldwinsville CHMENT) FILL IN SPACES B Director Name	NY EFORE USING ATTACH	13027 MENTS
Robert W. Bowden			Street Address		
30 Attucks Trail	State	Zip	Сну	State	Zip
Chatham, Director Name	MA	02633	Director Name		
treet Address			Street Address		
iity	State	Zip	City	State	Zip
O. SHARES AUTHORIZED UTHORIZED SHARES	("X" BOX FOR ATTAC	CHMENT)	11. SHARES ISSUED ("X" E	BOX FOR ATTACHMENT)	
unher of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
200 NO PAR VALUE			110	Common	No par

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 statements contained herein are true and correct.

Hacy Lucknick 2/32/is

Signature of Officer

Vacy L. Decknick

Frint or Type Name of Officer

Sec. Teta Cy

Thile of Officer



**€** 5

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

# PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001 Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

93019	NORTHEAST	"INTERIOR SYSTEM	S, INC.		
3. Street Address Principal Business C			City	State	Zip
1 Old Route 146, 4. Business Phone No. (518) 371–4080 7. Brief Description of the Character		5. State of Incorporation NEW YORK	Clifton Park	NY	12065 6 <b>8888</b>
Sales & installat B. NAMES AND ADDRESS President Name			MENT) FILL IN SPACES B.  Vice President Nome	EFORE USING ATTA	CHMENTS
David L. Clark			Jonathan Last Street Address		
4 Walsh Lane			3157 Hidden Lake	. Drive	
City	State	Zip	City	State	ZIp
Glifton Park Secretury Name	NY	12065	Baldwinsville Treasurer Name	NY	13027
Sandra Bowden			Robert Bowden Street Address		
30 Attucks Trail			30 Attucks Trail	_	
Sliy	State	Zip	City	State	Zip
Chatham,	MA	02633	Chatham	MA	02633
9. NAMES AND ADDRESS Director Name	ES OF THE DIR	ECTORS ("X" BOX FOR ATTA	CHMENT) FILL IN SPACES Director Name	BEFORE USING ATT	ACHMENTS
Robert Bowden			Sandra Bowden Street Address		
30 Attucks Trail			30 Attucks Trail	-	
Sity	State	Zip	City	State	Zip
Chatham Director Name	MA	02633	Chatham Director Name	MA	02633
Street Address			Street Address		
Sity	State	Zip	City	State	Zip
10. SHARES AUTHORIZED AUTHORIZED SHARES	) (*X* BOX FOR ATT.	ACHMENT)	11. SHARES ISSUED (*X	* BOX FOR ATTACHMEN	לד
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
200 NO PAR VALUE			110	Common	No Par

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

Title of Officer



Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and



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

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

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1. Corporate ID No.

2. Name of Corporation

93019	

NORTHEAST INTERIOR SYSTEMS, INC.

3. Street Address Principal Busii	ness Offic	1
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5. State of Incorporation **NEW YORK** 

State

FILL IN SPACES BEFORE USING ATTACHMENTS

Zip

1 Old Route 146, PO Box 809

Clifton Park

NY

12065 6. SIC Code

(518) 371-4080

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

Resale & Installation of Laboratory Casework

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

NY

Vice President Name

David L. Clark
Street Address

4 Walsh Lane

Zip

Jonathon Last

3157 Hidden Lake Dr.

Zip

Clifton Park

12065

Baldwinsville Deasurer Name

NY

13027

Sandra Bowden

Street Address

30 Attucks Trail

State

30 Attucks Trail

Robert Bowden

Chatham MA 02633 Chatham 02633 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Director Name

Director Name

City

Robert Bowden

30 Attucks Trail

MA

Sandra Bowden 30 Attucks Trail

State

Zip

Chatham Director Name

02633

Chatham Director Name

MA

02633

Street Address

City

Zip

Zip

City

State

Zip

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

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

ISSUED SHARES

Number of Shares

Street Address

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

Par Value

200 NO PAR VALUE

110

Class/Series Comm

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and

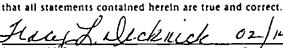
No Par

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



File Date: \_

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Signature of Si

or Type Name 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

(FORM MUST BE TYPED IN BLA	CK)				
I. Corporate ID No. 93019	2. Name of Corporation NORTHEAST IN	TERIOR SYSTEMS	, INC.		
3. Street Address Principal Business	Office		City	State	Zip
1 Old Route 146,	PO Box 809	S. State of Incorporation	Clifton Park	NY	12065 6. SIC Code
518-371-4080 2. Brief Description of the Character	of Business Conducted in Rho	NEW YORK de Island			0000
Resale & Installa 8. NAMES AND ADDRESS President Name			MENT) FILL IN SPACES BE	FORE USING ATTACHM	ENTS
David L. Clark Street Address			Jonathan Last Street Address		, ,
4 Walsh Lane	State	Zip	3157 Hidden Lake	Dr. State	l Zip
Clifton Park Secretary Name	NY	12065	. Baldinsville	NY	13027
Sandra Bowden Street Address			Robert Bowden Street Address		
237 Moe Road			237 Moe Road	المراجع المراجع والمراجع	
City	State	Zip	City	State	Zip
Clifton Park  9. NAMES AND ADDRESS  Director Name	NY SES OF THE DIRECT	12065 ORS (*x* box for attac	Clifton Park CHMENT) FILLIN SPACES I Director Name	NY BEFORE USING ATTACH	12065
Robert Bowden Street Address			Sandra Bowden . Street Address		<u>-</u> .
237 Moe Road	State	Zip	237 Moe Road	State	Zip
Clifton Park Director Name	NY .	12065,	Clifton Park	NY	.12065
Street Address			Street Address		
Ciry	State	Zip	City	State	Zip
10. SHARES AUTHORIZE AUTHORIZED SHARES	D (*X* BOX FOR ATTACH	MENT)	11. SHARES ISSUED (*X* ISSUED SHARES	BOX FOR ATTACHMENT)	· · · · · ·
Number of Shares	Class/Serles	far Value	Number of Shares	Class/Series	Par Value
200 NO PAR VALUE			110	Common _	No Par Value
This report must be sign	e <b>d in ink</b> by either	the President, Vice P	resident, Secretary, Assista	ant Secretary, Treasure	

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File Date:	Jul 26,99
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FOR SECRETARY	OF STATE USE ONLY



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

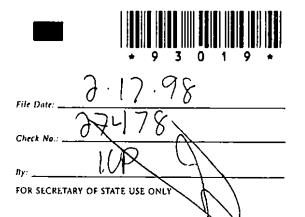
## 1009



## PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1998 Filing Period: January 1-March 1 • Filing Fee: \$50.00

string strious summary	1-march 1 · r	11111 FEE. \$30.00			INSTRUCTIONS
(FORM MUST BE TYPED IN BLAC	(X)				
I. Corporate ID No.	2. Name of Corporation				\
93019	NORTHEAST	INTERIOR SYSTEM	S, INC.		
3. Street Address Principal Business O	Office		City	State	Zip
One Old Route 146,		5. State of Incorporation	Clifton Park	NY	120G5 6. SIC Code
518–371–408 Brief Description of the Character of	· · <del>-</del>	NEW YORK hode Island			8888
Resale & In	stall of Labo	ratory Casework			
8. NAMES AND ADDRESS President Name		_	IMENT) Vice President Name		
David L. Clark Street Address			Bert Bowden Street Address	•	
4 Walsh Lane			206 Highland A	venue	
Sily	State	Zip	City	State	Zip
Clifton Park Secretary Name	NY	12065	Warwick Theasurer Name	RI	02886
Sandra Bowden Street Address			Robert Bowden Street Address		
237 Moe Road			237 Moe Road		
City	State	Zip	City	State	Zip
Clifton Park 9. NAMES AND ADDRESS Director Name	NY ES OF THE DIREC	1 2 0 6 5 TORS (*X* BOX FOR ATTA	Clifton Park CHMENT) Director Name	NY	12065
Robert Bowden			Sandra Bowden		
237 Moe Road			237 Moe Road		
Clifton Park	State NY	1 2 0 6 5	Clifton Park	State NY	<sup>21p</sup> 12065
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED	("X" BOX FOR ATTACE	HMENT)	11. SHARES ISSUED (*x* )	BOX FOR ATTACHMENT)	
Number of Sliares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
200 NO PAR VALUE		·	110	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 correct.

SWW ALVEN

Six asure of Officer

Print or Type Name of Officer

Date

DAVID L. CLARK

PRESIDENT

Title of Officer



James R. Lungevin, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335

#### PROFIT CORPORATION ANNUAL REPORT 1997

'lling Period: January 1-March 1 🕒 🔸	Filing Fee: \$50.00
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(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.

4. Business Phone No.

2. Name of Corporation 930 VA

14-1589950

Northeast Interior Systems, Inc.

3. Street Address Principal Business Office

One Old Route 146, PO Box 809

5. State of Incorporation

New York

State

12065

6. SIC Code

518-371-4080

New York

8888

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

Resale & Install of Laboratory Casework 8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT)

President Name

Street Address

City

Vice President Name

Bert Bowden

Clifton Park

Street Address

ZIp

206 Highland Ave.

City

City

Warwick

State

Clifton Park Secretary Name Sandra Bowden

4 Walsh Lane

David L. Clark

NY

12065

Treasurer Name

RI

02886

David L. Clark

Street Address

4 Walsh Lane

State

Clifton Park

237 Moe Road

NY

State

12065

Clifton Park

NY

12065

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

Director Name

Street Address

Director Name

Robert W. Bowden Street Address

237 Moe Road

Street Address

Clly

Clifton Park

State NY Zip 12065 City

State

ZIp

Director Name

Street Address

Director Name Street Address

City

City

State

Zip

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

State

AUTHORIZED SHARES Number of Shares

Class/Series

Par Value

2.10

ESSUED SHARES Number of Shares

Class/Series

Par Value

200

Common

5.00

110

Common

5.00

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 statements contained herein are true and correct.

Signature of Off

Tracy <u>Decknick</u> <u>L.</u> Print or Type Name of Officer

Title of Officer

Controller