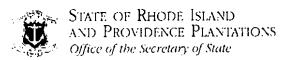
## Amendes Return



Matthew A. Brown, Secretary of State Corporations Division 148 W. Ruer St. Browdongo, BLO2013-36-15

Providence, RI 02904-2615 401-222-3040

## PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR \_\_\_\_\_ 2005

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

\* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

law (R.I.G.L. 7-1,2-1501(c&d))	is subject to a pen	alty fee of \$25.00.			
L Corporate ID No. 140520	. Name of Corpor T.E.M. Corp			_	
Street Address Principal Histories Office 280 Dry Bridge Road			North Kingstown	State RI	Διρ 02852
4 Business Phone No. 5 State of Incorporation 401-885-1100 Rhode Island		эл			
6 Thei Deception of the Character To engage in a business v			•		
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR AT Product Name  Thomas Miozzi			PTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS  Vice President Name		
Short Address 280 Dry Bridge Road			Street Address		
್ಟ North Kingstown	itae Rl	02852	Citi	State	Zip
Secretary Name			Freasurer Name		
Street Address			Street Address		
City	State	Zφ	Cur	State	Zφ
8. NAMES AND ADDRESSE Director Name	S OF THE DIREC	CTORS: ("X" BOX FOR A	ATTACHMENT)   FILL IN S	SPACES BEFORE USING	G ATTACHMENTS
Social Address			Street Address 22 00		
1,11)	State	Zip	City	State	着 得异
Duestor Name			Director Name 2 5 2 5		
Si eet Aadress			Street Address		<u> </u>
Citi	State	Zър	City	State	3.# 10.00 10.01 10.11
9. SHARES AUTHORIZED AUTHORIZED SHARES	("X" BOX FOR A	ATTACHMENT)	10. SHARES ISSUED (	"X" BOX FOR ATTAC	HMEN TOTO
Number of Shaves	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
100	Common	No Par Value	100	Common	No Par Value
This report must be execute this report must be executed			rized representative. If the co eer or trustee.	rporation is in the hand	s of a receiver or trustee,

_ 2008 <u> </u>

Under penalty of perjury, I declare including any accompanying sche		·
contained herein are true and corr	ect.	1 1
		11/30/06
Signature Thoragos 1	Miozzi	Datf
Print or Type Name. Prisident		
Tule		Form 630 Rev 12/05