



STATE OF RHODE ISLAND  
AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State

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 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 48320		2. Name of Corporation ALPINE CLEANING CORPORATION		
3. Street Address Principal Business Office 235 PROMENADE STREET		City PROVIDENCE	State RI	Zip 02908
4. Business Phone No. 401-272-3000		5. State of Incorporation RHODE ISLAND		6. SIC Code 7476
7. Brief Description of the Character of Business Conducted in Rhode Island TO PROVIDE CLEANING AND MAINTENANCE SERVICES.				
8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
President Name Thomas F. Guerra		Vice President Name None		
Street Address 235 Promenade Street		Street Address		
City Providence	State RI	Zip 02908	City	State RI
Secretary Name Thomas F. Guerra		Treasurer Name Thomas F. Guerra		
Street Address 235 Promenade Street		Street Address 235 Promenade Street		
City Providence	State RI	Zip 02908	City Providence	State RI
9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
Director Name Thomas F. Guerra		Director Name		
Street Address 235 Promenade Street		Street Address		
City Providence	State RI	Zip 02908	City	State
Director Name		Director Name		
Street Address		Street Address		
City	State	Zip	City	State
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> AUTHORIZED SHARES				
Number of Shares	Class/Series	Par Value	11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> ISSUED SHARES	
8,000 NO PAR VALUE			Number of Shares	Class/Series
			300	Common
				Par Value
				None

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



4 8 3 2 0

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 Thomas F. Guerra Date 1/10/05  
Print or Type Name of Officer  
**Thomas F. Guerra**  
**President**  
Title of Officer

File Date 1/14/05  
Check No. 20199  
By: VO  
FOR SECRETARY OF STATE USE ONLY



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State  
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 2004**

Filing Period: January 1 - March 1 • Filing Fee: \$50.00  
(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No 48320		2. Name of Corporation ALPINE CLEANING CORPORATION			
3. Street Address Principal Business Office 235 Promenade Street		City Providence		State RI	Zip 02908
4. Business Phone No. 401-272-3000		5. State of Incorporation RHODE ISLAND			6. SIC Code 7476
7. Brief Description of the Character of Business Conducted in Rhode Island TO PROVIDE CLEANING AND MAINTENANCE SERVICES.					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Gary Spicuzza			Vice President Name None		
Street Address 235 Promenade Street			Street Address		
City Providence	State RI	Zip 02908	City	State	Zip
Secretary Name Thomas F. Guerra			Treasurer Name Thomas F. Guerra		
Street Address 235 Promenade Street			Street Address 235 Promenade Street		
City Providence	State RI	Zip 02908	City Providence	State RI	Zip 02908
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Thomas F. Guerra			Director Name None		
Street Address 235 Promenade Street			Street Address		
City Providence	State RI	Zip 02908	City	State	Zip
Director Name Gary Spicuzza			Director Name		
Street Address 235 Promenade Street			Street Address		
City Providence	State RI	Zip 02908	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> AUTHORIZED SHARES			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> ISSUED SHARES		
Number of Shares 8,000 NO PAR VALUE	Class/Series	Par Value	Number of Shares 300	Class/Series Common	Par Value None

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



\* 4 8 3 2 0 \*

File Date	FILED
Check No.	JAN 26 2004
By:	By m17744
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 Officer Thomas Guerra Date 1/19/04  
Print or Type Name of Officer Thomas Guerra  
Title of Officer President



STATE OF RHODE ISLAND  
AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State

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 2003**

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. *48320*		2. Name of Corporation ALPINE CLEANING CORPORATION			
3. Street Address Principal Business Office 235 PROMENADE STREET			City PROVIDENCE	State RI	Zip 02908
4. Business Phone No. 4012723000		5. State of Incorporation RHODE ISLAND			6. SIC Code 7476
7. Brief Description of the Character of Business Conducted in Rhode Island TO PROVIDE CLEANING AND MAINTENANCE SERVICES.					
8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Gary Spicuzza			Vice President Name None		
Street Address 235 Promenade Street			Street Address .		
City Providence	State RI	Zip 02908	City .	State .	Zip .
Secretary Name Thomas F. Guerra			Treasurer Name Thomas F. Guerra		
Street Address 235 Promenade Street			Street Address 235 Promenade Street		
City Providence	State RI	Zip 02908	City Providence	State RI	Zip 02908
9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Thomas F. Guerra			Director Name None		
Street Address 235 Promenade Street			Street Address .		
City Providence	State RI	Zip 02908	City .	State .	Zip .
Director Name Gary Spicuzza			Director Name None		
Street Address 235 Promenade Street			Street Address .		
City Providence	State RI	Zip 02908	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			300	Common	None

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



\* 4 8 3 2 0 \*

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.

Thomas Guerra 3/19/03  
Signature of Officer Date  
Thomas Guerra  
Print or Type Name of Officer  
Treasurer  
Title of Officer

\*\*48320\* 2/19/03 11:36:16 AM\*

File Date 4-23-03

Check No. 2638

By: km

FOR SECRETARY OF STATE USE ONLY



STATE OF RHODE ISLAND  
AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State

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 2002**

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **48320** 2. Name of Corporation **ALPINE CLEANING CORPORATION**

3. Street Address Principal Business Office **235 Promenade Street** City **Providence, R.I.** State **R.I.** Zip **02908**  
4. Business Phone **(401) 272-3000** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **7476**

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

**To provide cleaning and maintenance services and for any other lawful purposes**

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

President Name **Gary Spicuzza** Vice President Name **NONE**  
Street Address **235 Promenade Street** Street Address **NONE**  
City **Providence** State **R.I.** Zip **02908** City **Providence** State **R.I.** Zip **02908**

Secretary Name **Thomas F. Guerra** Treasurer Name **Thomas F. Guerra**  
Street Address **235 Promenade Street** Street Address **235 Promenade Street**  
City **Providence** State **R.I.** Zip **02908** City **Providence** State **R.I.** Zip **02908**

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

Director Name **Thomas Guerra** Director Name **NONE**  
Street Address **235 Promenade Street** Street Address **NONE**  
City **Providence** State **R.I.** Zip **02908** City **Providence** State **R.I.** Zip **02908**

Director Name **Gary Spicuzza** Director Name **NONE**  
Street Address **235 Promenade Street** Street Address **NONE**  
City **Providence** State **R.I.** Zip **02908** City **Providence** State **R.I.** Zip **02908**

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

Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
8,000 NO PAR VALUE			300	Common	NONE
8,000 SHS NO PAR VALUE					

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



\* 4 8 3 2 0 \*

File Date: **3-12-02**  
Check No.: **2456**  
By: **km**

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.

**Thomas Guerra** **2/25/02**  
Signature of Officer Date  
**Thomas Guerra**  
Print or Type Name of Officer  
**Vice President**  
Title of Officer



STATE OF RHODE ISLAND  
AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State

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)

1. Corporate ID No. **48320** 2. Name of Corporation **ALPINE CLEANING CORPORATION**

3. Street Address Principal Business Office  
**235 Promenade Street**  
City **Providence** State **RI** Zip **02908**  
4. Business Phone No. **(401) 272-3000** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **7476**

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

To provide cleaning and maintenance services and for any other lawful purpose

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

President Name <b>Gary Spicuzza</b> Street Address <b>235 Promenade Street</b> City <b>Providence</b> State <b>RI</b> Zip <b>02908</b>	Vice President Name <b>None</b> Street Address  City State Zip
Secretary Name <b>Thomas F. Guerra</b> Street Address <b>235 Promenade Street</b> City <b>Providence</b> State <b>RI</b> Zip <b>02908</b>	Treasurer Name <b>Thomas F. Guerra</b> Street Address <b>235 Promenade Street</b> City <b>Providence</b> State <b>RI</b> Zip <b>02908</b>

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

Director Name <b>Thomas Guerra</b> Street Address <b>235 Promenade Street</b> City <b>Providence</b> State <b>RI</b> Zip <b>02908</b>	Director Name <b>None</b> Street Address  City State Zip
Director Name <b>Gary Spicuzza</b> Street Address <b>235 Promenade Street</b> City <b>Providence</b> State <b>RI</b> Zip <b>02908</b>	Director Name <b>NONE</b> Street Address  City State Zip

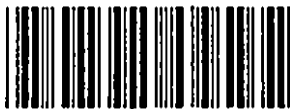
10. SHARES AUTHORIZED (\*X\* BOX FOR ATTACHMENT)

AUTHORIZED SHARES	Class/Series	Par Value
<b>8,000 SHS NO PAR VALUE</b>		

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

ISSUED SHARES	Class/Series	Par Value
<b>300</b>	<b>Common</b>	<b>None</b>

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



\* 4 8 3 2 0 \*

**FILED**

File Date: **JAN 29 2001**

Check No.: **By Ce 2057**

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.

**Thomas F. Guerra** 1/24/01  
Signature of Officer Date

**Thomas F. Guerra**  
Print or Type Name of Officer

**Secretary/Treasurer**  
Title of Officer



STATE OF RHODE ISLAND  
AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **48320** 2. Name of Corporation **ALPINE CLEANING CORPORATION**  
3. Street Address Principal Business Office **235 Promenade Street** City **Providence** State **RI** Zip **02908**  
4. Business Phone No. **272-3000** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **7476**  
7. Brief Description of the Character of Business Conducted in Rhode Island

To provide cleaning and maintenance services and for any other lawful purpose

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

President Name	Vice President Name
<b>Gary Spicuzza</b>	<b>None</b>
Street Address	Street Address
<b>235 Promenade Street</b>	
City	City
<b>Providence</b>	<b>Providence</b>
State	State
<b>RI</b>	<b>RI</b>
Zip	Zip
<b>02908</b>	
Secretary Name	Treasurer Name
<b>Thomas F. Guerra</b>	<b>Thomas F. Guerra</b>
Street Address	Street Address
<b>235 Promenade Street</b>	<b>235 Promenade Street</b>
City	City
<b>Providence</b>	<b>Providence</b>
State	State
<b>RI</b>	<b>RI</b>
Zip	Zip
<b>02908</b>	<b>02908</b>

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

Director Name	Director Name
<b>Thomas Guerra</b>	<b>None</b>
Street Address	Street Address
<b>235 Promenade Street</b>	
City	City
<b>Providence,</b>	<b>Providence</b>
State	State
<b>RI</b>	<b>RI</b>
Zip	Zip
<b>02908</b>	
Director Name	Director Name
<b>Gary Spicuzza</b>	<b>None</b>
Street Address	Street Address
<b>235 Promenade Street</b>	
City	City
<b>Providence</b>	<b>Providence</b>
State	State
<b>RI</b>	<b>RI</b>
Zip	Zip
<b>02903</b>	

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

AUTHORIZED SHARES  
Number of Shares Class/Series Par Value  
**8,000 SHS NO PAR VALUE**

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

ISSUED SHARES  
Number of Shares Class/Series Par Value  
**300 Common None**

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



\* 4 8 3 2 0 \*

FILED

File Date: MAY 08 2000

Check No.: 81002108

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] 5/4/00  
Signature of Officer Date

Thomas F. Guerra  
Print or Type Name of Officer

Secretary/Treasurer  
Title of Officer



STATE OF RHODE ISLAND  
AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State

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 BLACK)

1. Corporate ID No. <b>48320</b>		2. Name of Corporation <b>ALPINE CLEANING CORPORATION</b>	
3. Street Address Principal Business Office <b>235 Promenade Street</b>		City <b>Providence</b>	State <b>RI</b>
		Zip <b>02908</b>	
4. Business Phone No. <b>401-272-3000</b>	5. State of Incorporation <b>RHODE ISLAND</b>		6. SIC Code <b>7476</b>
7. Brief Description of the Character of Business Conducted in Rhode Island <b>To provide cleaning and maintenance services and for any other lawful purpose</b>			
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name <b>Gary Spicuzza</b>		Vice President Name <b>NONE</b>	
Street Address <b>235 Promenade Street</b>		Street Address	
City <b>Providence</b>	State <b>RI</b>	City	State
	Zip <b>02908</b>		Zip
Secretary Name <b>Thomas F. Guerra</b>		Treasurer Name <b>Thomas F. Guerra</b>	
Street Address <b>235 Promenade Street</b>		Street Address <b>235 Promenade Street</b>	
City <b>Providence</b>	State <b>RI</b>	City <b>Providence</b>	State <b>RI</b>
	Zip <b>02908</b>		Zip <b>02908</b>
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
Director Name <b>Thomas F. Guerra</b>		Director Name <b>NONE</b>	
Street Address <b>235 Promenade Street</b>		Street Address	
City <b>Providence</b>	State <b>RI</b>	City	State
	Zip <b>02908</b>		Zip
Director Name <b>Gary Spicuzza</b>		Director Name <b>NONE</b>	
Street Address <b>235 Promenade Street</b>		Street Address	
City <b>Providence</b>	State <b>RI</b>	City	State
	Zip <b>0290</b>		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	Number of Shares	Class/Series
<b>8,000 SHS NO PAR VALUE</b>		<b>300</b>	<b>Common</b>
	Par Value		Par Value
			<b>None</b>

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



\* 4 8 3 2 0 \*

File Date: **Feb 11 99**

Check No.: **1902**

By: **ID**

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.

**Thomas Guerra**  
Signature of Officer Date

**Thomas F. Guerra**  
Print or Type Name of Officer

**Secretary/ Treasurer**  
Title of Officer

# RHODE ISLAND EVIDENCE PLANTATIONS

Office of the Secretary of State

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. **48320** 2. Name of Corporation **ALPINE CLEANING CORPORATION**  
3. Street Address Principal Business Office **235 Promenade Street** City **Providence** State **RI** Zip **02908**  
4. Business Phone No. **(401) 272-3000** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **7476**  
7. Brief Description of the Character of Business Conducted in Rhode Island

To provide cleaning and maintenance services and for any other lawful purpose.

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

President Name <b>Gary Spicuzza</b> Street Address <b>235 Promenade Street</b> City <b>Providence</b> State <b>RI</b> Zip <b>02908</b>	Vice President Name <b>NONE</b> Street Address <b>235 Promenade Street</b> City <b>Providence</b> State <b>RI</b> Zip <b>02908</b>
Secretary Name <b>Thomas F. Guerra</b> Street Address <b>235 Promenade Street</b> City <b>Providence</b> State <b>RI</b> Zip <b>02908</b>	Treasurer Name <b>Thomas F. Guerra</b> Street Address <b>235 Promenade Street</b> City <b>Providence</b> State <b>RI</b> Zip <b>02908</b>

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

Director Name <b>Thomas Guerra</b> Street Address <b>235 Promenade Street</b> City <b>Providence</b> State <b>RI</b> Zip <b>02908</b>	Director Name <b>NONE</b> Street Address <b>235 Promenade Street</b> City <b>Providence</b> State <b>RI</b> Zip <b>02908</b>
Director Name <b>Gary Spicuzza</b> Street Address <b>235 Promenade Street</b> City <b>Providence</b> State <b>RI</b> Zip <b>02908</b>	Director Name <b>NONE</b> Street Address <b>235 Promenade Street</b> City <b>Providence</b> State <b>RI</b> Zip <b>02908</b>

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

AUTHORIZED SHARES  
Number of Shares Class/Series Par Value

**8,000 SHS NO PAR VALUE**

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

ISSUED SHARES  
Number of Shares Class/Series Par Value

**300 COMMON NONE**

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



File Date: 2.27.98 1744 10P

Check No.: 10P

By: 10P

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.

Thomas Guerra 2/11/98  
Signature of Officer Date

**Thomas Guerra**

Print or Type Name of Officer

**Treasurer**

Title of Officer





STATE OF RHODE ISLAND  
AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State

James R. Lungevin, 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.		2. Name of Corporation			
48320		Alpine Cleaning Corporation			
3. Street Address Principal Business Office		City	State	Zip	
235 Promenade Street		Providence	RI	02908	
4. Business Phone No.		5. State of Incorporation		6. SIC Code	
401-272-3000		RHODE ISLAND		7476	
7. Brief Description of the Character of Business Conducted in Rhode Island					
To provide cleaning and maintenance services and for any other lawful purpose.					
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT)					
President Name		Vice President Name			
Gary Spicuzza		NONE			
Street Address		Street Address			
235 Promenade Street		235 Promenade Street			
City	State	Zip	City	State	Zip
Providence	RI	02908			
Secretary Name		Treasurer Name			
Thomas F. Guerra		Thomas F. Guerra			
Street Address		Street Address			
235 Promenade Street		235 Promenade Street			
City	State	Zip	City	State	Zip
Providence	RI	02908	Providence	RI	02908
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT)					
Director Name		Director Name			
Thomas Guerra		NONE			
Street Address		Street Address			
235 Promenade Street		235 Promenade Street			
City	State	Zip	City	State	Zip
Providence,	RI	02908			
Director Name		Director Name			
Gary Spicuzza		NONE			
Street Address		Street Address			
235 Promenade Street		235 Promenade Street			
City	State	Zip	City	State	Zip
Providence	RI	02908			
10. SHARES AUTHORIZED AND ISSUED (*X* BOX FOR ATTACHMENT)					
AUTHORIZED SHARES		ISSUED SHARES			
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
8000	shares no par value		300	Common	None

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

File Date: 5/5/97  
Check No.: 11603  
By: GAA

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.

Thomas Guerra 4/28/97  
Signature of Officer Date

Thomas Guerra  
Print or Type Name of Officer

Treasurer  
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  
Filing Fee: \$50.00

PLEASE TYPE OR PRINT IN BLACK INK.

1. CORPORATE ID NO. 48320		2. NAME OF CORPORATION ALPINE CLEANING CORPORATION			
3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE 235 Promenade Street		CITY Providence		STATE RI	ZIP CODE 02908
4. BUSINESS PHONE NO. 401-272-3000		5. STATE OF INCORPORATION RHODE ISLAND			6. SIC CODE 7476
7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND To provide cleaning and maintenance services and for any other lawful purpose.					
8. NAMES AND ADDRESSES OF THE OFFICERS					
PRESIDENT NAME Carl D. Marcello			VICE PRESIDENT NAME Gary Spicuzza		
STREET ADDRESS 235 Promenade Street			STREET ADDRESS 235 Promenade Street		
CITY Providence	STATE RI	ZIP CODE 02908	CITY Providence	STATE RI	ZIP CODE 02908
SECRETARY NAME Carl D. MARcello			TREASURER NAME Thomas F. Guerra		
STREET ADDRESS 235 Promenade Street			STREET ADDRESS 235 Promenade Street		
CITY Providence	STATE RI	ZIP CODE 02908	CITY Providence	STATE RI	ZIP CODE 02908
9. NAMES AND ADDRESSES OF THE DIRECTORS					
DIRECTOR NAME Carl Marcello			DIRECTOR NAME Thomas Guerra		
STREET ADDRESS 235 Promenade Street			STREET ADDRESS 235-Promenade Street		
CITY Providence	STATE RI	ZIP CODE 02908	CITY Providence	STATE RI	ZIP CODE 02908
DIRECTOR NAME Gary Spicuzza			DIRECTOR NAME NONE		
STREET ADDRESS 235 Promenade Stret			STREET ADDRESS		
CITY Providence	STATE RI	ZIP CODE 02908	CITY	STATE	ZIP CODE
10. SHARES AUTHORIZED AND ISSUED					
AUTHORIZED SHARES			ISSUED SHARES		
NUMBER OF SHARES	CLASS / SERIES	PAR VALUE	NUMBER OF SHARES	CLASS / SERIES	PAR VALUE
8,000 SHS NO PAR VALUE			300	Common	NONE

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.

File Date:

2/28/96

Check No:

1240

By:

cc

For Secretary of State Use Only

Signature of Officer

GARY A. SPICUZZA

Print or Type Name of Officer

VICE PRESIDENT

Title of Officer

2/14/96

Date

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

# ANNUAL REPORT

Please Type or Print  
File Annually - Jan. 1 - March 1  
Filing Fee \$50.00  
Make Checks Payable to: Secretary of State

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

Corporate ID: 0048820

Annual Report for the year: 1995

Name of Corporation: ALPINE CLEANING CORPORATION

Business entity organized under the laws of the State of: Rhode Island

For foreign entity, address and telephone number of principal office:

Business Entity is (check one):

☒ Business Corporation (See RIGL Chapter 7-1.1)

☐ Professional Service Corporation (See RIGL Chapter 7-5.1)

Phone: ( )

Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):

235 Promenade Street  
Providence, RI 02908

Phone: ( 401 ) 272-3000

Brief statement of the character of business conducted in Rhode Island:  
To provide cleaning and maintenance

services and for any other lawful purpose.

## THE NAMES OF THE OFFICERS ARE:

	STREET ADDRESS	CITY/STATE	ZIP CODE
PRESIDENT			
Carl D. Marcello	235 Promenade Street	Providence, RI	02908
VICE PRESIDENT			
Gary Spicuzza	235 Promenade Street	Providence, RI	02908
SECRETARY			
Carl D. Marcello	235 Promenade Street	Providence, RI	02908
TREASURER			
Thomas F. Guerra	235 Promenade Street	Providence, RI	02908

## THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
Carl Marcello	235 Promenade Street	Providence, RI	02908
Thomas Guerra	235 Promenade Street	Providence, RI	02908
Gary Spicuzza	235 Promenade Street	Providence, RI	02908

NUMBER OF SHARES AUTHORIZED (Rider may be attached)

Number of Shares	Class / Series
8000	Common

NUMBER OF SHARES ISSUED AND OUTSTANDING (Rider may be attached)

Number of Shares	Class / Series
300	Common

Date: 3/29, 1995

By:

Thomas F. Guerra

PRINT OR TYPE NAME OF OFFICER SIGNING

Treasurer

TITLE OF OFFICER SIGNING

Form 31 1/95

## DESIGNATED REGISTERED AGENT FOR SERVICE OF PROCESS:

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

ELAINE T. BUCCI  
1920 MINERAL SPRING AVENUE  
NO. PROVIDENCE RI 02904

FILED

APR 25 1995

By: [Signature]

APR 23

Filing Fee \$50.00  
Payable to:  
Secretary of State

PLEASE TYPE OR PRINT  
State of Rhode Island and Providence Plantations  
Office of The Secretary of State  
100 North Main Street  
Providence, Rhode Island 02903-1335  
401-277-3040

48320  
67477  
File Annually  
LLC: Sept. 1 - Nov. 1  
CORP: Jan. 1 - March 1

Corporate ID: 0048320 Annual Report for the Year: 1994

Name of Business Entity: ALPINE CLEANING CORPORATION

Business entity organized under the  
laws of the State of: Rhode Island

Business Entity is (check one):  
☒ [ X ] Business Corporation (See RIGL Chapter 7-1.1)

Federal Taxpayer Identification Number: [REDACTED]

☐ [ ] Professional Service Corporation (See RIGL Chapter 7-5.1)

For foreign entity, address and telephone  
number of principal office:

☐ [ ] Limited Liability Company (See RIGL 7-16)

Name, title and mailing address of contact person to whom  
communications may be directed:

\_\_\_\_\_  
\_\_\_\_\_  
Phone: \_\_\_\_\_

Thomas F. Guerra  
235 Promenade Street  
Providence, RI 02908

Address and telephone of the principal office of business  
entity in Rhode Island (Provide street address -  
Not P.O. Box):

235 Promenade Street  
Providence, RI 02908

Brief statement of the character of business conducted in Rhode Island:  
To provide cleaning and maintenance services and for any other lawful  
purpose.

Phone: 272-3000

Date of Organization: March 28, 1991

Date of Qualification to do business in Rhode Island (if foreign entity):  
\_\_\_\_\_

THE NAMES OF THE OFFICERS ARE:

<input type="checkbox"/> Chief Executive Officer or	<input checked="" type="checkbox"/> President (Check One)	Street Address	City/State	Zip Code
		<u>Carl D. Marcello</u>	<u>235 Promenade Street, Providence, RI</u>	<u>02908</u>
<input type="checkbox"/> Chief Operating Officer or	<input checked="" type="checkbox"/> Vice President (Check One)	Street Address	City/State	Zip Code
		<u>Gary Spicuzza</u>	<u>235 Promenade Street, Providence, RI</u>	<u>02908</u>
<input type="checkbox"/> Custodian of Records or	<input checked="" type="checkbox"/> Secretary (Check One)	Street Address	City/State	Zip Code
		<u>Carl D. Marcello</u>	<u>235 Promenade Street, Providence, RI</u>	<u>02908</u>
<input type="checkbox"/> Chief Financial Officer or	<input checked="" type="checkbox"/> Treasurer (Check One)	Street Address	City/State	Zip Code
		<u>Thomas F. Guerra</u>	<u>235 Promenade Street, Providence, RI</u>	<u>02908</u>

THE NAMES OF THE DIRECTORS ARE:

Name	Street Address	City/State	Zip Code
Name	Street Address	City/State	Zip Code
Name	Street Address	City/State	Zip Code

NUMBER OF SHARES AUTHORIZED (If Applicable)  
Applicable)

NUMBER OF SHARES ISSUED AND OUTSTANDING (If

NUMBER 8,000

NUMBER 300

CLASS

CLASS

SERIES

SERIES

PAR VALUE OR  
WITHOUT PAR

PAR VALUE OR  
WITHOUT PAR

SEP 30 1994  
SECY OF STATE

Date: 9/21 1994

By

Thomas Guerra

Thomas Guerra  
Print or Type Name of Officer Signing  
Treasurer  
Title of Officer Signing

DESIGNATED REGISTERED OR RESIDENT 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.

Elaine T. Bucci  
Bucci Law Offices  
1920 Mineral Spring Ave.  
North Providence, RI 02904

Filing Fee \$50.00

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

1045719  
**State of Rhode Island and Providence Plantations**

CORPORATIONS DIVISION  
100 NORTH MAIN STREET  
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0045320 Annual Report for the year 1993

FIRST: The name of the corporation is ALPINE CLEANING CORPORATION

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is To provide cleaning and maintenance services  
and for any other lawful purpose.

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 235 Promenade Street, Providence, RI 02908

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name Office Address (including number, street, zip code)

	Director	
	Director	
	Director	
<u>Carl D. Marcello</u>	<u>President</u>	<u>235 Promenade Street, Providence, RI 02908</u>
<u>Gary Spicuzza</u>	<u>Vice President</u>	<u>235 Promenade Street, Providence, RI 02908</u>
<u>Carl D. Marcello</u>	<u>Secretary</u>	<u>235 Promenade Street, Providence, RI 02908</u>
<u>Thomas F. Guerra</u>	<u>Treasurer</u>	<u>235 Promenade Street, Providence, RI 02908</u>

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
8,000			\$ .10

PAID

JAN 27 1993

SECY OF STATE

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
300			\$ .10

Dated January 19 1993

Alpine Cleaning Corporation

(Name of Corporation)

By Carl D. Marcello

Title President

(Report must be signed by an officer)

Filing Fee \$50.00

307 1/2

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

# State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION  
100 NORTH MAIN STREET  
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0048320 Annual Report for the year 1992

FIRST: The name of the corporation is Alpine Cleaning Corporation

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FOURTH: If foreign corporation, address of its principal office

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SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
Carl D. Marcello	President	235 Promenade Street, Providence, RI 02908
Gary Spicuzza	Vice President	235 Promenade Street, Providence, RI 02908
Carl D. Marcello	Secretary	235 Promenade Street, Providence, RI 02908
Thomas F. Guerra	Treasurer	235 Promenade Street, Providence, RI 02908

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
8,000			\$.10

EIGHTH: Number of Shares issued:

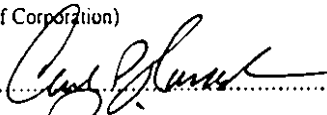
No. of Shares	Class	Series	Par Value or statement that shares are without par value
300			\$.10

Dated December 1, 1992

Alpine Cleaning Corporation

(Name of Corporation)

By



Title

President

(Report must be signed by an officer)