



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

0016321

1995

Corporate ID: _____ Annual Report for the year: _____

R. I. ANALYTICAL LABORATORIES, INC.

Name of Corporation: _____

Business entity organized under the laws of the State of: _____

Business Entity is (check one):

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

Business Corporation (See RIGL Chapter 7-1.1)

Professional Service Corporation (See RIGL Chapter 7-5.1)

Phone: () _____

Brief statement of the character of business conducted in Rhode Island:

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

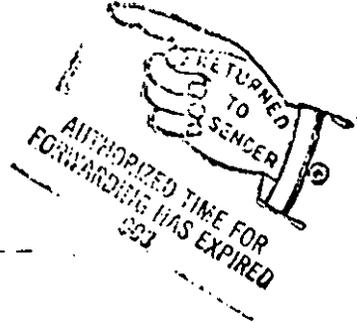
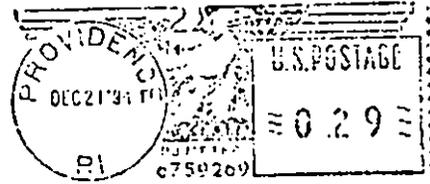
Phone: () _____

THE NAMES OF THE OFFICERS ARE:

| PRESIDENT | STREET ADDRESS | CITY/STATE | ZIP CODE |
|----------------|----------------|------------|----------|
| VICE PRESIDENT | STREET ADDRESS | CITY/STATE | ZIP CODE |
| SECRETARY | STREET ADDRESS | CITY/STATE | ZIP CODE |
| TREASURER | STREET ADDRESS | CITY/STATE | ZIP CODE |

Secretary of State
 DIVISION
 STREET
 SLAND 02903

DROP SHIPMENT
 AUTHORIZATION 60
 MAILED AT BOSTON MA
 PRESORTED FIRST-CLASS



 ZIP CODE

 ZIP CODE

 ZIP CODE

 (attached)

JOSEPH J. RODIG, ESQ.
 200 DYER STREET
 PROVIDENCE RI 02903