



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Matthew A. Brodin, 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 OR PRINTED IN BLACK)

1. Corporate ID No. 82327		2. Name of Corporation Jorge & Susan Gabriel, Inc.			
3. Street Address Principal Business Office 1705 Stafford Road		City Tiverton		State RI	Zip 02878
4. Business Phone No. (401) 624-9105		5. State of Incorporation RHODE ISLAND			6. SIC Code 7435
7. Brief Description of the Character of Business Conducted in Rhode Island TO ENGAGE IN ALL PHASES OF THE GARMENT INDUSTRY.					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Susan Gabriel			Vice President Name Jorge Gabriel		
Street Address 1705 Stafford Road			Street Address 1705 Stafford Road		
City Tiverton	State RI	Zip 02878	City Tiverton	State RI	Zip 02878
Secretary Name Jorge Gabriel			Treasurer Name Susan Gabriel		
Street Address 1705 Stafford Road			Street Address 1705 Stafford Road		
City Tiverton	State RI	Zip 02878	City Tiverton	State RI	Zip 02878
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Susan Gabriel			Director Name Jorge Gabriel		
Street Address 1705 Stafford Road			Street Address 1705 Stafford Road		
City Tiverton	State RI	Zip 02878	City Tiverton	State RI	Zip 02878
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
AUTHORIZED SHARES					
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1,000 NO PAR VALUE	Common	No Par Value	100	Common	No Par Value
11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
ISSUED SHARES					
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value

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



File Date	FILED
Check No.	MAR 01 2005 779
By:	By MB-
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.

Susan Gabriel 1/4/05
Signature of Officer Date
Susan Gabriel
Print or Type Name of Officer
President
Title of Officer



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

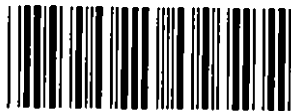
PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

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

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 82327		2. Name of Corporation Jorge & Susan Gabriel, Inc.		
3. Street Address Principal Business Office 1705 Stafford Road		City Tiverton	State RI	Zip 02878
4. Business Phone No. (401) 624-9105		5. State of Incorporation RHODE ISLAND		6. SIC Code 7435
7. Brief Description of the Character of Business Conducted in Rhode Island TO ENGAGE IN ALL PHASES OF THE GARMENT INDUSTRY.				
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
President Name Susan Gabriel		Vice President Name Jorge Gabriel		
Street Address 1705 Stafford Road		Street Address 1705 Stafford Road		
City Tiverton	State RI	Zip 02878	City Tiverton	State RI
Secretary Name Jorge Gabriel		Treasurer Name Susan Gabriel		
Street Address 1705 Stafford Road		Street Address 1705 Stafford Road		
City Tiverton	State RI	Zip 02878	City Tiverton	State RI
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
Director Name Susan Gabriel		Director Name Jorge Gabriel		
Street Address 1705 Stafford Road		Street Address 1705 Stafford Road		
City Tiverton	State RI	Zip 02878	City Tiverton	State RI
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
1,000 NO PAR VALUE	Common	No Par Value	100	Common

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



* 8 2 3 2 7 *

FILED

File Date

MAR 01 2004

Check No.

By: 430 CMA

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.

Susan Gabriel

Signature of Officer

Date

Susan Gabriel

Print or Type Name of Officer

President

Title of Officer



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 2003

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

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No.

2. Name of Corporation

82327

Jorge & Susan Gabriel, Inc.

3. Street Address Principal Business Office

1705 Stafford Road

City

Tiverton

State

RI

Zip

02878

4. Business Phone No.

(401) 624-9105

5. State of Incorporation

RHODE ISLAND

6. SIC Code

7435

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

Dry Cleaning

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

President Name

Susan Gabriel

Vice President Name

Jorge Gabriel

Street Address

1705 Stafford Road

Street Address

1705 Stafford Road

City

Tiverton

State

RI

Zip

02878

City

Tiverton

State

RI

Zip

02878

Secretary Name

Jorge Gabriel

Treasurer Name

Susan Gabriel

Street Address

1705 Stafford Road

Street Address

1705 Stafford Road

City

Tiverton

State

RI

Zip

02878

City

Tiverton

State

RI

Zip

02878

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

Director Name

Susan Gabriel

Director Name

Jorge Gabriel

Street Address

1705 Stafford Road

Street Address

1705 Stafford Road

City

Tiverton

State

RI

Zip

02878

City

Tiverton

State

RI

Zip

02878

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

1,000 NO PAR VALUE

Common

No Par Value

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

ISSUED SHARES

Number of Shares

Class/Series

Par Value

100

Common

No Par Value

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



* 8 2 3 2 7 *

File Date:

3.3.03

Check No.:

145

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.

Susan Gabriel

Signature of Officer

Date

Susan Gabriel

Print or Type Name of Officer

President

Title of Officer

Form 630 12/02



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
401-277-3040



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. **82327** 2. Name of Corporation **Jorge & Susan Gabriel, Inc.**
3. Street Address Principal Business Office **1705 Stafford Road** City **Tiverton** State **RI** Zip **02878**
4. Business Phone No. **(401) 624-9105** 5. State of Incorporation **Rhode Island** 6. SIC Code **7435**
7. Brief Description of the Character of Business Conducted in Rhode Island

Dry Cleaning

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

President Name Susan Gabriel Street Address 1705 Stafford Road City Tiverton State RI Zip 02878 Secretary Name Jorge Gabriel Street Address 1705 Stafford Road City Tiverton State RI Zip 02878	Vice President Name Jorge Gabriel Street Address 1705 Stafford Road City Tiverton State RI Zip 02878 Treasurer Name Susan Gabriel Street Address 1705 Stafford Road City Tiverton State RI Zip 02878
--	---

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

Director Name Susan Gabriel Street Address 1705 Stafford Road City Tiverton State RI Zip 02878 Director Name Jorge Gabriel Street Address 1705 Stafford Road City Tiverton State RI Zip 02878	Director Name Jorge Gabriel Street Address 1705 Stafford Road City Tiverton State RI Zip 02878 Director Name Susan Gabriel Street Address 1705 Stafford Road City Tiverton State RI Zip 02878
--	--

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

AUTHORIZED SHARES		
Number of Shares	Class/Series	Par Value
1,000	Common	No Par Value

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

ISSUED SHARES		
Number of Shares	Class/Series	Par Value
100	Common	No Par Value

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

File Date: 3-1-02

Check No.: 5288

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 of Officer [Signature] Date 2/21/02

Print or Type Name of Officer JORGE GABRIEL

Title of Officer Vice President/Secretary



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



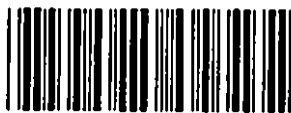
PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 82327		2. Name of Corporation Jorge & Susan Gabriel, Inc.	
3. Street Address Principal Business Office 1705 Stafford Road		City Tiverton	State RI
4. Business Phone No. (401) 624-9105		5. State of Incorporation RHODE ISLAND	
6. SIC Code 7435		7. Brief Description of the Character of Business Conducted in Rhode Island Dry Cleaning	
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name Susan Gabriel		Vice President Name Jorge Gabriel	
Street Address 1705 Stafford Road		Street Address 1705 Stafford Road	
City Tiverton	State RI	City Tiverton	State RI
Secretary Name Jorge Gabriel		Treasurer Name Susan Gabriel	
Street Address 1705 Stafford Road		Street Address 1705 Stafford Road	
City Tiverton	State RI	City Tiverton	State RI
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS			
Director Name Susan Gabriel		Director Name Jorge Gabriel	
Street Address 1705 Stafford Road		Street Address 1705 Stafford Road	
City Tiverton	State RI	City Tiverton	State RI
Director Name Susan Gabriel		Director Name Jorge Gabriel	
Street Address 1705 Stafford Road		Street Address 1705 Stafford Road	
City Tiverton	State RI	City Tiverton	State RI
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT) AUTHORIZED SHARES			
Number of Shares 1,000 SHS NO PAR VALUE	Class/Series	Par Value	
11. SHARES ISSUED (*X* BOX FOR ATTACHMENT) ISSUED SHARES			
Number of Shares 100	Class/Series Common	Par Value NPV	

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



* 8 2 3 2 7 *

File Date: 2/16
Check No.: 4713
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.

Susan Gabriel 2/13/2001
Signature of Officer Date
Susan Gabriel
Print or Type Name of Officer
President
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. **82327** 2. Name of Corporation **Jorge & Susan Gabriel, Inc.**
3. Street Address Principal Business Office **1705 Stafford Road** City **Tiverton** State **RI** Zip **02878**
4. Business Phone No. **(401) 624-9105** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **7435**

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

Dry Cleaning

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

President Name

Susan Gabriel

Street Address

1705 Stafford Road

City **Tiverton** State **RI** Zip **02878**

Secretary Name

Jorge Gabriel

Street Address

1705 Stafford Road

City **Tiverton** State **RI** Zip **02878**

Vice President Name

Jorge Gabriel

Street Address

1705 Stafford Road

City **Tiverton** State **RI** Zip **02878**

Treasurer Name

Susan Gabriel

Street Address

1705 Stafford Road

City **Tiverton** State **RI** Zip **02878**

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

Director Name

Susan Gabriel

Street Address

1705 Stafford Road

City **Tiverton** State **RI** Zip **02878**

Director Name

Jorge Gabriel

Street Address

1705 Stafford Road

City **Tiverton** State **RI** Zip **02878**

Director Name

Jorge Gabriel

Street Address

1705 Stafford Road

City **Tiverton** State **RI** Zip **02878**

Director Name

Susan Gabriel

Street Address

1705 Stafford Road

City **Tiverton** State **RI** Zip **02878**

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

AUTHORIZED SHARES

Number of Shares Class/Series Par Value

1,000 SHS NO PAR VALUE

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

ISSUED SHARES

Number of Shares Class/Series Par Value

100 Common NPV

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



* 8 2 3 2 7 *

File Date: 3/1/00

Check No.: 4341

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.

Susan Gabriel 2/29/2000
Signature of Officer Date

SUSANGABRIEL
Print or Type Name of Officer

President
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. 82327		2. Name of Corporation Jorge & Susan Gabriel, Inc.	
3. Street Address Principal Business Office 1705 Stafford Road		City Tiverton	State RI
4. Business Phone No. (401) 624-9105		5. State of Incorporation RHODE ISLAND	6. SIC Code 02878
7. Brief Description of the Character of Business Conducted in Rhode Island Dry Cleaning			
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) • FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name Susan Gabriel		Vice President Name Jorge Gabriel	
Street Address 1705 Stafford Road		Street Address 1705 Stafford Road	
City Tiverton	State RI	City Tiverton	State RI
Zip 02878		Zip 02878	
Secretary Name Jorge Gabriel		Treasurer Name Susan Gabriel	
Street Address 1705 Stafford Road		Street Address 1705 Stafford Road	
City Tiverton	State RI	City Tiverton	State RI
Zip 02878		Zip 02878	
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) • FILL IN SPACES BEFORE USING ATTACHMENTS			
Director Name Susan Gabriel		Director Name Jorge Gabriel	
Street Address 1705 Stafford Road		Street Address 1705 Stafford Road	
City Tiverton	State RI	City Tiverton	State RI
Zip 02878		Zip 02878	
Director Name Susan Gabriel		Director Name Jorge Gabriel	
Street Address 1705 Stafford Road		Street Address 1705 Stafford Road	
City Tiverton	State RI	City Tiverton	State RI
Zip 02878		Zip 02878	
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)			
AUTHORIZED SHARES			
Number of Shares	Class/Series	Par Value	
1,000 SHS NO PAR VALUE	Common Stock		
11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)			
ISSUED SHARES			
Number of Shares	Class/Series	Par Value	
100	Common	NPV	

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

File Date: Mar 2, 1999
Check No.: 4090
By: SG

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.

Susan Gabriel 3/1/99
Signature of Officer Date
President + Susan Gabriel
Print or Type Name of Officer
President +
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
401-277-3040



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. **82327** 2. Name of Corporation **Jorge & Susan Gabriel, Inc.**

3. Street Address Principal Business Office **1705 Stafford Road** City **Tiverton** State **RI** Zip **02878**
4. Business Phone No. **(401) 624-9105** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **7435**

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

Dry Cleaning

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

President Name

Susan Gabriel

Street Address

1705 Stafford Road

City **Tiverton** State **RI** Zip **02878**

Secretary Name

Jorge Gabriel

Street Address

1705 Stafford Road

City **Tiverton** State **RI** Zip **02878**

Vice President Name

Jorge Gabriel

Street Address

1705 Stafford Road

City **Tiverton** State **RI** Zip **02878**

Treasurer Name

Susan Gabriel

Street Address

1705 Stafford Road

City **Tiverton** State **RI** Zip **02878**

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

Director Name

Susan Gabriel

Street Address

1705 Stafford Road

City **Tiverton** State **RI** Zip **02878**

Director Name

Director Name

Jorge Gabriel

Street Address

1705 Stafford Road

City **Tiverton** State **RI** Zip **02878**

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

1,000 SHS NO PAR VALUE Common Stock

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

ISSUED SHARES

Number of Shares Class/Series Par Value

100 Common NPV

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



* 8 2 3 2 7 *

File Date: **3-2-98**

Check No.: **2023**

By: **ICP**

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

Date

Print or Type Name of Officer

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
401-277-3040



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.

82327

2. Name of Corporation

Jorge & Susan Gabriel, Inc.

3. Street Address Principal Business Office

1705 Stafford Road

City

Tiverton

State

RI

Zip

02878

4. Business Phone No.

(401) 624-9105

5. State of Incorporation

RHODE ISLAND

6. SIC Code

7435

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

Dry Cleaning

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

President Name

Susan Gabriel

Vice President Name

Jorge Gabriel

Street Address

1705 Stafford Road

Street Address

1705 Stafford Road

City

Tiverton

State

RI

Zip

02878

City

Tiverton

State

RI

Zip

02878

Secretary Name

Jorge Gabriel

Treasurer Name

Susan Gabriel

Street Address

1705 Stafford Road

Street Address

1705 Stafford Road

City

Tiverton

State

RI

Zip

02878

City

Tiverton

State

RI

Zip

02878

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

Director Name

Susan Gabriel

Director Name

Jorge Gabriel

Street Address

1705 Stafford Road

Street Address

1705 Stafford Road

City

Tiverton

State

RI

Zip

02878

City

Tiverton

State

RI

Zip

02878

Director Name

Street Address

City

State

Zip

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

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

1,000 SHS NO PAR VALUE

ISSUED SHARES

Number of Shares

Class/Series

Par Value

100

Common

NPV

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



* 8 2 3 2 7 *

File Date:

3.10.97

Check No.:

2260

By:

ICP

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.

Susan Gabriel 3/28/97
Signature of Officer Date

Susan Gabriel
Print or Type Name of Officer

President

Title of Officer

**PROFIT CORPORATON
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. **82327** 2. NAME OF CORPORATION

05-0481231-

Jorge & Susan Gabriel, Inc.

3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE

1705 Stafford Road

CITY

Tiverton

STATE

RI

ZIP CODE

02878

4. BUSINESS PHONE NO.

(401) 624-9105

5. STATE OF INCORPORATION

RI

6. SIC CODE

7435

7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND

Dry Cleaning

8. NAMES AND ADDRESSES OF THE OFFICERS

PRESIDENT NAME

Susan Gabriel

STREET ADDRESS

1705 Stafford Road

CITY

Tiverton

STATE

RI

ZIP CODE

02878

VICE PRESIDENT NAME

Jorge Gabriel

STREET ADDRESS

1705 Stafford Road

CITY

Tiverton

STATE

RI

ZIP CODE

02878

SECRETARY NAME

Jorge Gabriel

STREET ADDRESS

1705 Stafford Road

CITY

Tiverton

STATE

RI

ZIP CODE

02878

TREASURER NAME

Susan Gabriel

STREET ADDRESS

1705 Stafford Road

CITY

Tiverton

STATE

RI

ZIP CODE

02878

9. NAMES AND ADDRESSES OF THE DIRECTORS

DIRECTOR NAME

Susan Gabriel

STREET ADDRESS

1705 Stafford Road

CITY

Tiverton

STATE

RI

ZIP CODE

02878

DIRECTOR NAME

Jorge Gabriel

STREET ADDRESS

1705 Stafford Road

CITY

Tiverton

STATE

RI

ZIP CODE

02878

DIRECTOR NAME

STREET ADDRESS

CITY

STATE

ZIP CODE

DIRECTOR NAME

STREET ADDRESS

CITY

STATE

ZIP CODE

10. SHARES AUTHORIZED AND ISSUED

NUMBER OF SHARES	AUTHORIZED SHARES CLASS / SERIES	PAR VALUE	NUMBER OF SHARES	ISSUED SHARES CLASS / SERIES	PAR VALUE
1,000	Common	NPV	100	Common	NPV

This report must be **SIGNED IN INK** by either the
President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

File Date:

6/10/96

Check No:

1872

By:

ce

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

Susan Gabriel

Print or Type Name of Officer

SUSAN Gabriel

Title of Officer

President

Date

6/5/96

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

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

Corporate ID: 05-0481231 82327 Annual Report for the year: 1995

Name of Business Entity: Jorge & Susan Gabriel, Inc.

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

Federal Taxpayer Identification Number: _____

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

Phone: _____

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

1705 Stafford Road

Tiverton, RI 02878

Phone: (401) 624-9105

Business Entity is (check one)

- ☒ Business Corporation (See RIGL Chapter 7-1.1)
☐ Professional Service Corporation (See RIGL Chapter 7-5.1)
☐ Limited Liability Company (See RIGL 7-16)

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

Susan Gabriel, President

1705 Stafford Road

Tiverton, RI 02878

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

Dry Cleaning

Date of Organization: 12/6/94

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

THE NAMES OF THE OFFICERS ARE:

OFFICE	NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
CHIEF EXECUTIVE OFFICER OR <input checked="" type="checkbox"/> PRESIDENT (if applicable)	<u>Susan Gabriel</u>	<u>1705 Stafford Road, Tiverton, RI</u>	<u>02878</u>	<u>02878</u>
CHIEF OPERATING OFFICER OR <input checked="" type="checkbox"/> VICE PRESIDENT (if applicable)	<u>Jorge Gabriel</u>	<u>1705 Stafford Road, Tiverton, RI</u>	<u>02878</u>	<u>02878</u>
CUSTODIAN OF RECORDS OR <input checked="" type="checkbox"/> SECRETARY (if applicable)	<u>Jorge Gabriel</u>	<u>1705 Stafford Road, Tiverton, RI</u>	<u>02878</u>	<u>02878</u>
CHIEF FINANCIAL OFFICER OR <input checked="" type="checkbox"/> TREASURER (if applicable)	<u>Susan Gabriel</u>	<u>1705 Stafford Road, Tiverton, RI</u>	<u>02878</u>	<u>02878</u>

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
<u>Susan Gabriel</u>	<u>1705 Stafford Road, Tiverton, RI</u>	<u>02878</u>	<u>02878</u>
<u>Jorge Gabriel</u>	<u>1705 Stafford Road, Tiverton, RI</u>	<u>02878</u>	<u>02878</u>

NUMBER OF SHARES AUTHORIZED (if Applicable)

NUMBER 1,000

CLASS Common

SERIES

PAR VALUE OR NPV
WITHOUT PAR

NUMBER OF SHARES ISSUED AND OUTSTANDING (if Applicable)

NUMBER 100

CLASS Common

SERIES

PAR VALUE OR NPV
WITHOUT PAR

Date 3/14 19 95

By:

PRINT OR TYPE NAME OF OFFICER SIGNING

TITLE OF OFFICER SIGNING

Form 31 1/94

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.

FILED

MAR 16 1995

By 161522