

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

Matthew A. Broden, Secretary of State 2005 PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR Filing Period: January 1 - March 1 • Filing Fee: \$50.00 (FORM MUST BE TYPED OR PRINTED IN BIACK) 1. Corporate ID No. 2. Name of Corporation 82327 Jorge & Susan Gabriel, Inc. 3 Street Address Principal Business Office Tiverton 1705 Stafford 03878 5. State of Incorporation G. SIC Code (401) 624-9105 **RHODE ISLAND** 7435 7. Brief Description of the Character of Business Conducted in Rhigle Island TO ENGAGE IN ALL PHASES OF THE GARMENT INDUSTRY. 8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS SUSan Gabriel Jorge Gabriel otafford Koad Stafford Road 02878 Tiveitur Tiverton C2378 Jorge Gabrel ousan Gabriel 1705 Stafford Road Stafford ROad State TIVEMON ักสธาธ 9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS an Gabrel Director Name Street Address Street Address City State 7.Ip 10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) AUTHORIZED SHARES ISSUED SHARES Number of Shares Number of Shares Class/Series Par Value Class/Scries Par Value 1,000 NO PAR VALUE No Par Value No Har Value  $C(\Omega m n \log n)$ 100 COMMON 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, contained herein are true and correct. FILED

File Date MAR 0 1 2005 FOR SECRETARY OF STATE USE ONLY including any accompanying schedules and statements, and that all statements

suan Gabriel	114105
Signature of Officer	Date
Susan Gabriel	

Print or Type Name 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 (FORM MUST BE TYPED OR P		Filing Fee: \$50.00			<u> </u>	
1. Corporate ID No.	2. Name of Corpo	ration			<u> </u>	
82327	Jorge & S	usan Gabriel, Inc.				
3. Street Address Principal Busin 1705 Stafford	ess Office		City Tiverton	State RI	02878	
4. Business Phone No. (401) 624-910	5	5. State of Incorporation RHODE ISLAN			6. SIC Code 7435	
	PHASES OF THE G	ed in Rhode Island GARMENT INDUSTRY.				
8. NAMES AND ADDRESS President Name Susan Gabriel	ES OF THE OFFIC	ERS: ("X" BOX FOR ATT	Vice President Name	N SPACES BEFORE USIN	G ATTACHMENTS	
Street Address		<del></del>	Jorge Gabriel Street Address	<u> </u>	<del>_</del>	
1705 Stafford	Road		1705 Stafford	Road		
City	State	Zip	City	State	Zip	
Tiverton	RI	02878	Tiverton	RI	02878	
Secretary Name	*************************		Treasurer Name	·····		
Jorge Gabriel			Susan Gabriel			
Street Address	<del></del>		Street Address			
1705 Stafford	Road		1705 Stafford	Road		
City	State	7.lp	City	State	Zip	
Tiverton	RI	02878	Tiverton	RI	02878	
9. NAMES AND ADDRESS Strector Name	ES OF THE DIREC	TORS: ("X" BOX FOR A	TTACHMENT) FILL Director Name	IN SPACES BEFORE US	ING ATTACHMENTS	
Susan Gabriel			Jorge Gabriel			
Greet Address	<del></del>	-	Street Address		<u> </u>	
1705 Stafford	Road		1705 Stafford Road			
City	State	Zip	City	State	Zip	
Tiverton	RI	02878	Tiverton	RI	02878	
Director Name			Director Name		111+++++ <b>1</b> 1+++++++++++++++++++++++++++	
Street Address			Street Address			
City	State	Zip	City	State	Zip	
10. SHARES AUTHORIZE AUTHORIZED SHARES	O ("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	
4.000 NO DAD WALLE						
1,000 NO PAR VALUE	Common	No Par Value	100	Common	No Par Value	
This report must b	c signed in ink by	either the President, Vice	President, Secretary, Assis	lant Secretary Treasurer	Receiver or Trustee	
•	<b>9</b> · · · · · · · · · · · · · · · · · · ·		· 1001001111 Decicia: 31 110513	iam secretary, ricasurer.	Necestes of Trustee	
		A 101				
			Under penalty of p	erjury, I declare and affirm t	hat I have examined this report	
<del></del>	<del>82327</del>	<del>*</del> ₁	including any acco contained herein ar		tements, and that all statements	
File Date	ILED	_	SLUCI.			
Check No	R 0 1 2004		Signature of Officer	Ft 1000 al	Date	
By:By_	430 6	<u>M</u>	Print or Type Name	of Officer		
FOR SECRETARY OF	STATE USE ONLY		Title of Officer	ent		



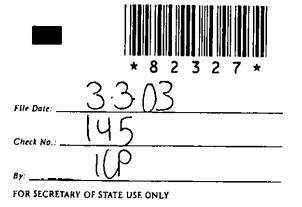
Edward S. Inman, III, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

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

401-222-3040

(FORM MUST BE TYPED OR PRINTED IN BLACK) 1. Corporate ID No. 2. Name of Corporation Jorge & Susan Gabriel, Inc. 3. Street Address Principal Business Office State 1705 Stafford Road Tiverton RI 02878 4. Business Phone No. 5. State of Incorporation 6. SIC Code (401) 624-9105 **RHODE ISLAND** 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 Vice President Name Susan Gabriel Jorge Gabriel Street Address Street Address 1705 Stafford Road 1705 Stafford Road City State Tiverton 02878 Tiverton 02878 RI Secretary Name Treasurer Name Jorge Gabriel Susan Gabriel Street Address Street Address 1705 Stafford Road 1705 Stafford Road City Tiverton 02878 RI Tiverton RI 02878 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Director Name Susan Gabriel Jorge Gabriel Street Address Street Address 1705 Stafford Road 1705 Stafford Road City City Tiverton RI 02878 Tiverton RI 02878 Director Name Director Name Street Address Street Address City State City 10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) AUTHORIZED SHARES ESSUED SHARES Number of Shares Class/Series Par Value Number of Shares Class/Series 1,000 NO PAR VALUE Common No 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



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.

Had Market Signature of Officer Date

SUSAM GAME!

Dresident

Form 630 12/02



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

STOP PIE ASE READ INSURECTIONS

1,000	Common	No Par Value	100	Common	No Par Value
AUTHORIZED SHARES Number of Shares	Class/Series	Par Value	ISSUED SHARES  Number of Shares	Class/Series	Par Value
10. SHARES AUTHORIZI	ED (*X* BOX FOR AT	TACHMENT)	11. SHARES ISSUED (*)	(* BOX FOR ATTACHMENT)	
City	State	Zip	City	State	Zip
Street Address			Street Address		
Tiverton Director Name	RI	02878	Tiverton  Director Name	RI	02878
City 1705 Stafford	Road State	Zip	1705 Stafford	State	ZIp
Susan Gabriel Street Address			Jorge Gabriel Street Address	Pood	
9. NAMES AND ADDRES  Director Name	SSES OF THE DIR	ECTORS ("X" BOX FOR ATT	Director Name		
Tiverton	RI	02878	Tiverton	RI	02878
1705 Stafford	State	Zip	· City	State	Zip
Jorge Gabriel Street Address	Dood		Susan Gabriel Street Address 1705 Stafford	Road	
Tiverton Secretary Name	RI	02878	Tiverton Treasurer Name	RI	02878
City 1705 Stafford	Road State	Zip	1705 Stafford	Road State	Zip
Susan Gabriel Street Address			Jorge Gabriel Street Address		
Dry Cleaning 8. NAMES AND ADDRES President Name	SSES OF THE OFF	FICERS ("X" BOX FOR ATTAC	HMENT) Vice President Name		
(401) 624-9105 7. Brief Description of the Character	er of Business Conducted	Rhode Isl	and		7435
1705 Stafford Ros	ad	5. State of Incorporation	Tiverton	RI	02878 6. SIC Code
82327 3. Street Address Principal Busines		& Susan Gabriel,	Inc.	State	Zip
1. Corporate ID No.	2. Name of Corpor	ation	•	•	
(FORM MUST BE TYPED IN BL	ACK)				

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

Ed. D.	3-1-02	
File Date:	· - · · · · · · · · · · · · · · · · · ·	_
Check No.:	5288	
	3	
Ву:	<u>U</u>	_
COD SECRETAR	V OF CTATE LIES 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 for Officer

Date

TORIE CARRIEL

Prife or Type Page of Officer

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

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

(FORM MU	ST BE TYPED IN BL	ACK)						'	
1. Corporate		2. Name of Corp.	<sup>oration</sup> Susan G	abriel, I	nc.				
3. Street Add	tress Principal Busines:	o Office			City	.5	itate	Zip	
	1705 Staff	ord Road			Tiver		RI	·	878
4. Business i	Phone No. (401) 624-	9105		ite of Incorporation				6. SIC Co.	
7. Brief Desc	ription of the Characte	r of Business Conducte	d in Rhode Islan	đ					
	Dry Cleani	.ng							
8. NAME President Na		SSES OF THE OF	FICERS (*x	BOX FOR ATTAC	CHMENT) FILL 1 Vice President No	N SPACES BEFOR	E USING ATTAC	HMENTS	
	Susan Gabr	iel				Jorge Gabr	iel		
Street Addres					Street Address	J			
	1705 Staff	ord Road				1705 Staff	ord Road		
City		State	Zip		City	S	late	ZIp	
	Tiverton	RI		02878		Tiverton	· RI		02878
Secretary Na			•		Treasurer Name				
	Jorge Gabr	iel				Susan Gabr	iel		
Street Addres					Street Address				
_	1705 Staff					1705 Staff	ord Road		
City	Timonton	State	Zip	00070	City	· · · · · · · · · · · · · · · · · · ·	ate	Zip	
	Tiverton	RI		02878		Tiverton	RI		02878
). NAME Director Nam	e	SES OF THE DI	RECTORS (*	X° BOX FOR ATT	ACHMENT) FILI Director Name	L IN SPACES BEFO	RE USING ATTA	CHMENTS	
	Susan Gabr	iel				Jorge Gabr	iel		
treet Addres.					Street Address				
	1705 Staff				,	1705 Staff	ord Road		
lty	Tiverton	State	Zip	00070	City		ate	Zip	
Director Nam		RI		02878	Director Name	Tiverton	RI	•	02878
treet Address					Street Address				
шу		State	Zip		City	St	ate	Zip	
O. SHARI		D (*X* BOX FOR AT	TACHMENT)		11. SHARES	ISSUED (*x* BOX	FOR ATTACHMENT)		·
umber of Sh	ares	Class/Series	Par Va	lue	Number of Shares	C	ass/Series	Par Value	
1,000	SHS NO PAR	VALUE			, -	100	_		

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

100



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.

Common

NPV

susan sabriel	al1312001	
Signature of Officer	Date	_
C		

FOR SECRETARY OF STATE USE ONLY

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.

2. Name of Corporation

82327

Jorge & Susan Gabriel, Inc.

	3.	Street	Address	Principal	Business	Office
--	----	--------	---------	-----------	----------	--------

1705 Stafford Road

City

**Tiverton** 

State

Zip

4. Business Phone No.

5. State of Incorporation

RI

02878

(401) 624-9105

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

Vice President Name

Susan Gabriel

Street Address

Jorge Gabriel

Street Address

City

City

1705 Stafford Road

1705 Stafford Road

City

Zip

Zip

Tiverton

RT

02878

Tiverton

Setretary Name

Street Address

Jorge Gabriel

Treasurer Name

02878

Susan Gabriel

Street Address

1705 Stafford Road

1705 Stafford Road

Cin

Tiverton

02878

RI Tiverton RI 02878 9. NAMES AND ADDRESSES OF THE DIRECTORS (\*X\* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Susan Gabriel

Street Address

1705 Stafford Road

City

Zip

Street Address

Director Name

Jorge Gabriel

1705 Stafford Road

Tiverton

State

Zip

Street Address

City

02878

Tiverton

Director Name

RI

RI

02878

**Director Name** 

Street Address

City

State

Zio

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

AUTHORIZED SHARES Number of Shares

Class/Series

State

Par Value

Zip

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

ISSUED SHARES

Number of Shares

Class/Series

Par Value

1,000 SHS NO 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:

Check No .:

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

SUSANGADI 1E

Print or Type Name of Officer Title 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

STOP PLIANT READ INSTRUCTIONS

(FORM MUST BE TYPED IN BE	LACK)				
1. Corporate ID No 82327	2. Name of Corpor		T		
3 Street Address Principal Busine		& Susan Gabriel,			
1705 Stafford	• • • • • • • • • • • • • • • • • • • •		· City <b>Tiverton</b>	State <b>R</b> I	21p
4. Business Phone No.		5 State of Incorporation		K.i	02878
(401) 624-910	5	RHODE ISI			, 6. 31C. Coae
7. Brief Description of the Character Dry Cleaning	ter of Business Conducted			•	
8. NAMES AND ADDRE	SSES OF THE OFF	ICERS ("X" BOX FOR ATT	ACHMENT) FILL IN SPACE	ES BEFORE USING ATT	ACHMENTS
Susan Gabriel			Jorge Gabrie	1	
Street Address			Street Address	- ·-· ·	· · · · · · · · · · · · · · · · · · ·
1705 Stafford	Road		1705 Staffor	d Road	
City	State	Zip	City	State	- · · Zip
Tiverton	RI	02878	Tiverton	RI	02878
Secretary Name	•	* * ** ******* **	Treasurer Name	**************************************	**** ********** *************
Jorge Gabriel			· Susan Gabrie	1	
Street Address			Street Address	•	
1705 Stafford	Road		1705 Staffor	d Road	
City	State	Zip	City	State	Zip
Tiverton	RI	02878	Tiverton	RI	; <b>02878</b>
9. NAMES AND ADDRE Director Name	SSES OF THE DIR	ECTORS ("X" BOX FOR A	TTACHMENT) • FILL IN SPA  Director Name	CES BEFORE USING AT	TTACHMENTS
Susan Gabriel			Jorge Gabrie	1	
Street Address			Street Address		
1705 Stafford	Road		1705 Staffor	d Road	
City	State	Z1p	City	State	Zip
Tiverton	<b>RI</b>	02878	Tiverton	RI RI	02878
Ditector Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZE AUTHORIZED SHARES	ED (*x* box for att	ACHMENT)	11. SHARES ISSUED	(*X* BOX FOR ATTACHME	(NT) (
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1,000 SHS NO PAR	VALUE Com	on Stock	100	Common	NPV
			1	· · · · · · · · · · · · · · · · · · ·	
<del></del>	· · · · · · · · · · · · · · · · · · ·	<del></del>	<del></del>	i	
This report must be sign	n <b>ed in ink</b> by eitl	her the President. Vice	e President, Secretary, As	sistant Secretary Tres	SUPER Deceiver of Truck

1705 Stafford Road

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

#### PI FII

02878

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PROFIT CORI	PORATION ANNUAL y 1-March 1 • Filing Fee: \$50	REPORT FOR	THE YEAR 19	98	STOP PUNSERIAD INSPRESIONS
(FORM MUST BE TYPED IN BL	ACK)				
1. Corporate ID No. <b>82327</b>	2. Name of Corporation  Jorge & Susan Gabriel, Inc.				
3. Street Address Principal Busines	s Office	City	State	Zip	

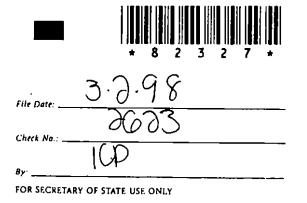
**Tiverton** 

4. Business Phone No. 6. SIC Code 7435 RHODE ISLAND (401) 624-9105 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 Vice President Name Susan Gabriel Jorge Gabriel Street Address Street Address 1705 Stafford Road 1705 Stafford Road City State Zip City State Zip Tiverton RI 02878 **Tiverton** RI 02878 Secretary Name Treasurer Name Jorge Gabriel Susan Gabriel Street Address Street Address 1705 Stafford Road 1705 Stafford Road City State City State Tiverton 02878 RI Tiverton RI 02878 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) Director Name Director Name Susan Gabriel Jorge Gabriel Street Address Street Address 1705 Stafford Road 1705 Stafford Road Ch: Zip City Tiverton RI 02878 Tiverton RI 02878 Director Name Director Name Street Address Street Address City State Zip City State Zip 10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) AUTHORIZZZO SHARES 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

100

Title of Officer



Common Stock

1,000 SHS NO PAR VALUE

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 Print or Type Name of

Common

NPV



James R. Langevin, Secretary of State Corporations Division 100 North Main Street, Providence, Rl 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	)			
L Cornerte ID No.	2 Name of Course			•



1. Corporate ID No. <b>82327</b>	2. Name of Corpora  Jorge & Su	san Gabriel, Inc.			
3. Street Address Principal Business	<del>-</del>	•	City	State	Zip
1705 Stafford Ro 4. Business Phone No. (401) 624-9105	oad	S. State of Incorporation RHODE ISLA		RI	02878 6. SIC Code 7435
7. Brief Description of the Characte Dry Cleaning	er of Business Conducted (	n Rhode Island			
8. NAMES AND ADDRES President Name	SSES OF THE OFF	ICERS ("X" BOX FOR ATTA	CHMENT)  Vice President Name		
Susan Gabriel			Jorge Gabriel		
Street Address	•		Street Address	_	
1705 Stafford Ro			1705 Stafford Roa		
City Tiverton	State	Zip 02979	City	State	Zip
Secretary Name	. RI	02878	Tiverton	. RI	02878
Jorge Gabriel			Treasurer Name Susan Gabriel		
Street Address			Street Address		
1705 Stafford Ro					
City Station Ko	State	Zip	1705 Stafford Roa	1d State	Zip
Tiverton	RI	02878	Tiverton	RI.	02878
9. NAMES AND ADDRES	SES OF THE DIRI	ECTORS ("X" BOX FOR AT	TACHMENT) Director Name	-	3200
Susan Gabriel Street Address			Jorge Gabriel Street Address		
,1705 Stafford Ro	ad State	Zip	1705 Stafford Ros	state	Zip
Tiverton Director Name	RI .	02878	Tiverton Director Name	RI	02878
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZE AUTHORIZZO SHARES	D AND ISSUED	"X" BOX FOR ATTACHMENT	SSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1,000 SHS NO PAR \	/ALUE		100	Соштоп	NPV

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.

Print or Type Name of Officer

Title of Officer

President

### **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.

CORPORATE ID NO.	8232	2. HAME OF CORPORATION

05-0481231-Jorge & Susan Gabriel, Inc.

3. STREET ADORESS PRINCIPAL BUS	SINESS OFFICE		CITY	STATE	ZIP CODE
1705 Stafford	Road		Tiverton	RI	02878
4. BUSINESS PHONE NO.		5 STATE OF INCORPORATION			6 SIC CODE
(401) 624-910	5	RI			7435
7 BRIEF DESCRIPTION OF THE CHAR	JACTER OF BUSINESS CONDUCTED IN RH	ODE ISLAND			
Dry Cleaning	8. NAMES	AND ADDRE	SSES OF THE O	FFICERS	
PRESIDENT NAME			VICE PRESIDENT NAME		
Susan Gabriel STREET ADDRESS			Jorge Gabriel STREET ADORESS		
1705 Stafford	Road		1705 Stafford Ro	ad	
CITY	STATE	ZIP COOE	CITY	STATE	ZIP CODE
Tiverton Secretary name	RI '	02878	Tiverton TREASURER NAME	RI	02878
Jorge Gabriel STREET ADDRESS			Susan Gabriel STREET ADDRESS		
1705 Stafford	Road		1705 Stafford Ro	ad	
CITY	STATE	ZIP CODE	CITY	STATE	ZIP CODE
Tiverton	RI	02878	Tiverton	RI	02878
DIRECTOR HAME	9. NAMES	AND ADDRES	SSES OF THE D	IRECTOAS	
Susan Gabriel STREET ADDRESS			Jorge Gabriel STREET ADDRESS		
1705 Stafford	Road		1705 Stafford Ros	ad	
CITY	STATE	ZIP COOE	CITY	STATE	ZIP CODE
<b>Tiv</b> ert <b>o</b> n	RI	02878	Tiverton	<b>RI</b>	02878
DIRECTOR NAME			DIRECTOR HAME		
STREET ADDRESS			STREET ADDRESS		
СПУ	STATE	ZIP CODE	СПУ	STATE	ZIP COOE
	1 0. S F	SARES AUTHO	DRIZED AND IS	SUED	
	AUTHORIZED SHARES	· · · ·		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

100

NPV

4/10/94 File Date:

Common

1,000

Check No:

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 bereig are true and correct.

Common

Signature of Officer

Print or

Title of Officer

NPV

Tling Fee \$50.00 hyable to: lecretary of State

#### PLEASE TYPE or PRINT

State of Rhode Island and Providence Plantations Office of The Secretary of State File Annually LLC: Sept. 1 - Nov. 1 CORP: Jan. 1 - March 1

100 North Main Street Providence, Rhode Island 02903-1335 401-277-3040

Corporate ID: 05-0481231 8232 /	Annual Report for the year:1995			
laine of Business Entity: Jorge & Susan Ga	briel, Inc.			
lusiness entity organized under the laws of the State ofRI	Business Entity is (check one)	<del></del>		
ederal Taxpayer Identification Number:	Professional Service Corporation (See F	X   Business Corporation (See RIGE Chapter 7-3.1) 		
	Name, title and mailing address of contact person to communications may be directed:  Susan Gabriel, President	whom		
	1705 Stafford Road			
lione:	Tiverton, RI 02878			
eldress and telephone of the principal office of business entity in stand (Provide street address - Not P.O. Box):  1705 Stafford Road	Brief statement of the character of business conduct  Dry Cleaning	ed in Rhode Island:		
Tiverton, RI 02878				
	Date of Organization: 12/6/94			
1юне: ( 401) 624-9105	Date of Qualification to do business in Rhode Island	) (if foreign entity):		
THE N	AMES OF THE OFFICERS ARE:			
Terming and Christian Barbara (M. 1981 200 M. 1992 Per 1993)	STREET STREET	2(P ( FH )		
Susan Gabriel Jenut obtaating of the Company of the	1705 Stafford Road, Tiverton, RI	02878		
Jorge Gabriel J CUSTOMIANOT RECORDS OF THE STREET AND INSCREDENT	1705 Stafford Road, Tiverton, RI	02878 21P CCIS		
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Susan Gabriel	1705 Stafford Road, Tiverton, RI	/iřčíšíi		
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Susan Gabriel	1705 Stafford Road, Tiverton, RI	02878 71FCFHR		
Jorge Gabriel	1705 Stafford Road, Tiverton, RI	02878 ZIPCCID		
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DESIGNATED REGISTERED	OR RESIDENT AGENT FOR SERVICE OF PROCESS:			

LEASE 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

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