



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 OR PRINTED IN BLACK)

1. Corporate ID No. 56932		2. Name of Corporation Anthony Damiani, C.P.A., Inc.		
3. Street Address Principal Business Office 1845 Post Road - Unit 4N		City WARWICK	State RI	Zip 02886
4. Business Phone No. 401-738-0410		5. State of Incorporation RHODE ISLAND		6. SIC Code 7658
7. Brief Description of the Character of Business Conducted in Rhode Island ACCOUNTING FIRM				
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS				
President Name Anthony J. Damiani		Vice President Name Anthony J. Damiani		
Street Address 73 Francis Ave		Street Address 73 Francis Ave		
City PAWTUCKET	State RI	Zip 02860	City PAWTUCKET	State RI
Secretary Name Anthony J. Damiani		Treasurer Name Anthony J. Damiani		
Street Address 73 Francis Ave		Street Address 73 Francis Ave		
City PAWTUCKET	State RI	Zip 02860	City PAWTUCKET	State RI
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS				
Director Name		Director Name		
Street Address		Street Address		
City	State	Zip	City	State
Director Name		Director Name		
Street Address		Street Address		
City	State	Zip	City	State
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) ☐				
11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐				
AUTHORIZED SHARES		ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series
1,000 COMM NO PAR VALUE	NONE		200	Common

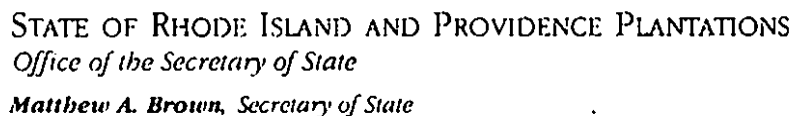
This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



File Date	1-13-05
Check No.	6577
By:	2
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.

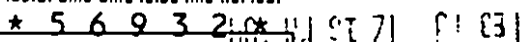
Signature of Officer Anthony J. Damiani Date 1/11/05
Print or Type Name of Officer Anthony J. Damiani
Title of Officer PRESIDENT



Corporations Division
100 North Main Street
Providence, RI 02903-1335
401.222.3040

(FORM MUST BE TYPED OR PRINTED IN BLACK)

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.

contained herein are true and correct.

Anthony J. Damiani 2/16/04
Signature of Officer Date
ANTHONY J. DAMIANI
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.

56932

2. Name of Corporation

Anthony Damiani, C.P.A., Inc.

3. Street Address Principal Business Office

1845 Post Road-UNIT 4N

City

WARWICK

State

RI

Zip

02886

4. Business Phone No.

401-738-0410

5. State of Incorporation

RHODE ISLAND

6. SIC Code

7658

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

ACCOUNTING FIRM

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

FILL IN SPACES BEFORE USING ATTACHMENTS.

President Name

ANTHONY J. DAMIANI

Street Address

73 FRANCIS AVE

City

PAWT.

State

RI

Zip

02860

Vice President Name

ANTHONY J. DAMIANI

Street Address

73 FRANCIS AVE

City

PAWT.

State

RI

Zip

02860

Secretary Name

ANTHONY J. DAMIANI

Street Address

73 FRANCIS AVE

City

PAWT

State

RI

Zip

02860

Treasurer Name

ANTHONY J. DAMIANI

Street Address

73 FRANCIS AVE

City

PAWT.

State

RI

Zip

02860

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

FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

Director Name

Street Address

Street Address

City

State

Zip

City

State

Zip

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)

AUTHORIZED SHARES

ISSUED SHARES

Number of Shares

Class/Series

Par Value

1,000 COMM NO PAR VALUE

Number of Shares

Class/Series

Par Value

200

Common NO PAR

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



* 5 6 9 3 2 *

File Date:

3-10-03

Check No.:

5865

By:

2

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

Anthony J. Damiani

Date

3/7/03

Print or Type Name of Officer

ANTHONY J. DAMIANI

Title of Officer

PRESIDENT



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. **56932**
2. Name of Corporation **Anthony Damiani, C.P.A., Inc.**
3. Street Address Principal Business Office
747 Pontiac Ave # 210
4. Business Phone No. **401-461-3330**
5. State of Incorporation
RHODE ISLAND

City **CRANSTON** State **RI** Zip **02910**
6. SIC Code
7658

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

ACCOUNTING FIRM

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

President Name **Anthony J. Damiani**
Street Address **73 FRANCIS AVE**
City **PAWT.** State **RI** Zip **02860**

Vice President Name **Anthony J. Damiani**
Street Address **73 FRANCIS AVE**
City **PAWT.** State **RI** Zip **02860**

Secretary Name **Anthony J. Damiani**
Street Address **73 FRANCIS AVE**
City **PAWTUCKET** State **RI** Zip **02860**

Treasurer Name **Anthony J. Damiani**
Street Address **73 FRANCIS AVE**
City **PAWT.** State **RI** Zip **02860**

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

Director Name
Street Address
City State Zip

Director Name
Street Address
City State Zip

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

AUTHORIZED SHARES
Number of Shares Class/Series Par Value
1,000 COMM NO PAR VALUE

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

ISSUED SHARES
Number of Shares Class/Series Par Value
200 Common NO PAR

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



* 5 6 9 3 2 *

File Date: **1-22-02**
Check No.: **5407**
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 **1/21/02**
Print or Type Name of Officer **Anthony J. Damiani**
Title of Officer **PRESIDENT**



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. 56932 2. Name of Corporation Anthony Damiani, C.P.A., Inc.

3. Street Address Principal Business Office 747 Pontiac Ave #210 City CRANSTON State RI Zip 02910

4. Business Phone No. 401-461-3330 5. State of Incorporation RHODE ISLAND 6. SIC Code 7658

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

ACCOUNTING FIRM

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

President Name ANTHONY J. DAMIANI
Street Address 73 FRANCIS AVE
City PAWTUCKET State RI Zip 02860

Secretary Name ANTHONY J. DAMIANI
Street Address 73 FRANCIS AVE
City PAWTUCKET State RI Zip 02860

Vice President Name ANTHONY J. DAMIANI
Street Address 73 FRANCIS AVE
City PAWTUCKET State RI Zip 02860

Treasurer Name ANTHONY J. DAMIANI
Street Address 73 FRANCIS AVE
City PAWTUCKET State RI Zip 02860

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

Director Name NONE
Street Address

City State Zip

Director Name

Street Address

City State Zip

Director Name

Street Address

City State Zip

Director Name

Street Address

City State Zip

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

AUTHORIZED SHARES

Number of Shares Class/Series Par Value
1,000 SHS NO PAR COM

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

ISSUED SHARES

Number of Shares Class/Series Par Value
200 COMMON NO PAR

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



* 5 6 9 3 2 *

File Date: 1/3

Check No.: 4901

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 Anthony J. Damiani Date 1/3/01

Print or Type Name of Officer ANTHONY J. DAMIANI

Title of Officer PRESIDENT



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. **56932** 2. Name of Corporation **Anthony Damiani, C.P.A., Inc.**
3. Street Address Principal Business Office **747 Pontiac Ave #210** City **Cranston** State **RI** Zip **02910**
4. Business Phone No. **401-461-3330** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **7658**

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

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

President Name ANTHONY J. DAMIANI	Vice President Name ANTHONY J. DAMIANI
Street Address 73 FRANK'S AVE	Street Address 73 FRANK'S AVE
City PAWT. State RI Zip 02860	City PAWT. State RI Zip 02860
Secretary Name ANTHONY J. DAMIANI	Treasurer Name ANTHONY J. DAMIANI
Street Address 73 FRANK'S AVE	Street Address 73 FRANK'S AVE
City PAWT. State RI Zip 02860	City PAWT. State RI Zip 02860

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

Director Name NONE	Director Name
Street Address	Street Address
City State Zip	City State Zip
Director Name	Director Name
Street Address	Street Address
City State Zip	City State Zip

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

AUTHORIZED SHARES

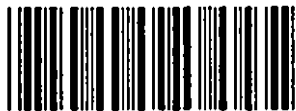
Number of Shares	Class/Series	Par Value
1,000 SHS	NO PAR COM	

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

ISSUED SHARES

Number of Shares	Class/Series	Par Value
200	Common	NO PAR

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



* 5 6 9 3 2 *

File Date: **PAID**
Check No.: **JAN 21 2000**
By: **SEC'Y OF STATE**
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 **Anthony J. Damiani** Date **1/19/00**
Print or Type Name of Officer **PRESIDENT**



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. 58932		2. Name of Corporation Anthony Damiani, C.P.A., Inc.			
3. Street Address Principal Business Office 747 PORTIAL AVE #210		City CRANSTON	State RI	Zip 02910	
4. Business Phone No. 401-461-3330		5. State of Incorporation RHODE ISLAND		6. SIC Code 7658	
7. Brief Description of the Character of Business Conducted in Rhode Island TAX SERVICES					
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name ANTHONY J. DAMIANI		Vice President Name ANTHONY J. DAMIANI			
Street Address 73 FRANCIS AVE		Street Address 73 FRANCIS AVE			
City PAWTUCKET	State RI	Zip 02860	City PAWTUCKET	State RI	Zip 02860
Secretary Name ANTHONY J. DAMIANI		Treasurer Name ANTHONY J. DAMIANI			
Street Address 73 FRANCIS AVE		Street Address 73 FRANCIS AVE			
City PAWTUCKET	State RI	Zip 02860	City PAWTUCKET	State RI	Zip 02860
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name NONE		Director Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
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) ☐
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1,000 SHS NO PAR COM			200	COMMON	NO PAR

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



File Date: **1.8.99**
Check No.: **3649**
By: **UP**

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: **Anthony J. Damiani** Date: **1/5/99**
Print or Type Name of Officer: **ANTHONY J. DAMIANI**
Title of Officer: **PRESIDENT**



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. **58932** 2. Name of Corporation **Anthony Damiani, C.P.A., Inc.**

3. Street Address Principal Business Office **747 Pontiac Ave #210** City **Cranston** State **RI** Zip **02910**

4. Business Phone No. **401-461-3330** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **7658**

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

ACCOUNTING SERVICES

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

President Name **Anthony J. Damiani**
Street Address **73 Francis Ave**
City **Pawt.** State **RI** Zip **02860**

Secretary Name **Anthony J. Damiani**
Street Address **73 Francis Ave**
City **Pawt.** State **RI** Zip **02860**

Vice President Name **Anthony J. Damiani**
Street Address **73 Francis Ave**
City **Pawt.** State **RI** Zip **02860**

Treasurer Name **Anthony J. Damiani**
Street Address **73 Francis Ave**
City **Pawt.** State **RI** Zip **02860**

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

Director Name **None**
Street Address

City State Zip

Director Name

Street Address

City State Zip

Director Name

Street Address

City State Zip

Director Name

Street Address

City State Zip

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

AUTHORIZED SHARES

Number of Shares Class/Series Par Value

1,000 SHS NO PAR COM

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

ISSUED SHARES

Number of Shares Class/Series Par Value

200 Common NO PAR

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



* 5 6 9 3 2 *

File Date: **2.11.98**

Check No.: **3205**

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 **Anthony J. Damiani** Date **2/8/98**

Print or Type Name of Officer **Anthony J. Damiani**

Title of Officer **President**



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.

56932

2. Name of Corporation

Anthony Damiani, C.P.A., Inc.

3. Street Address Principal Business Office

747 Pontiac Ave #310

City

Cranston

State

RI

Zip

02910

4. Business Phone No.

401-461-3330

5. State of Incorporation

RHODE ISLAND

6. SIC Code

7658

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

ACCOUNTING SERVICES

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

President Name

Anthony J. Damiani

Street Address

747 Pontiac Ave #310

City

Cranston

State

RI

Zip

02910

Secretary Name

Anthony J. Damiani

Street Address

73 Francis Ave

City

Pawtucket

State

RI

Zip

02860

Vice President Name

Anthony J. Damiani

Street Address

73 Francis Ave

City

Pawtucket

State

RI

Zip

02860

Treasurer Name

Anthony J. Damiani

Street Address

73 Francis Ave

City

Pawtucket

State

RI

Zip

02860

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

Director Name

Street Address

City

State

Zip

Director Name

Street Address

City

State

Zip

Director Name

Street Address

City

State

Zip

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 COM

ISSUED SHARES

Number of Shares

Class/Series

Par Value

200

Common

NO PAR

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



File Date: 11/1/97

Check No.: 2701

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: Anthony J. Damiani Date: 12/27/96

Print or Type Name of Officer: Anthony J. Damiani

Title of Officer: PRESIDENT

PROFIT CORPORATION
ANNUAL REPORT

1996

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



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

PLEASE TYPE OR PRINT IN BLACK INK.

1 CORPORATE ID NO 56932 2 NAME OF CORPORATION

~~05-0447484~~ Anthony J. DAMIANI, INC.

3 STREET ADDRESS PRINCIPAL BUSINESS OFFICE

CITY

STATE

ZIP CODE

747 Pontiac Ave #210

CRANSTON

RI

02910

4 BUSINESS PHONE NO

5 STATE OF INCORPORATION

6 S.C. CODE

401-461-3330

RI

7658

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

Accounting Services

8. NAMES AND ADDRESSES OF THE OFFICERS

PRESIDENT NAME

VICE PRESIDENT NAME

Anthony J. DAMIANI

Anthony J. DAMIANI

STREET ADDRESS

STREET ADDRESS

73 FRANCIS AVE

73 FRANCIS AVE

CITY

STATE

ZIP CODE

CITY

STATE

ZIP CODE

PAWT.

RI

02860

PAWT.

RI

02860

SECRETARY NAME

TREASURER NAME

Anthony J. DAMIANI

Anthony J. DAMIANI

STREET ADDRESS

STREET ADDRESS

73 FRANCIS AVE

73 FRANCIS AVE

CITY

STATE

ZIP CODE

CITY

STATE

ZIP CODE

PAWTUCKET

RI

02860

PAWT.

RI

02860

9. NAMES AND ADDRESSES OF THE DIRECTORS

DIRECTOR NAME

DIRECTOR NAME

STREET ADDRESS

STREET ADDRESS

CITY

STATE

ZIP CODE

CITY

STATE

ZIP CODE

DIRECTOR NAME

DIRECTOR NAME

STREET ADDRESS

STREET ADDRESS

CITY

STATE

ZIP CODE

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

1000

Common

NO PAR

200

Common

NO PAR

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:

8/7

Check No:

2489

By:

140

For Secretary of State Use Only

Signature of Officer

Print or Type Name of Officer

Title of Officer

Date

FORM 31 12/95

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

ANNUAL REPORT

Please Type or Print

File Annually - Jan. 1 - March 1

Filing Fee \$50.00

Make Checks Payable to: Secretary of State

ALL ENTRIES MUST BE COMPLETED IN FULL OR THE FORM WILL BE RETURNED.Corporate ID: 0056932 Annual Report for the year: 1995Name of Corporation: Anthony Damiani, C.P.A., Inc.Business entity organized under the laws of the State of: RI

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: (401) 461-3330

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

747 PONTIAC AVE #210
CRANSTON, RI 02910Phone: (401) 461-3330

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

ACCOUNTING SERVICES**THE NAMES OF THE OFFICERS ARE:**

	STREET ADDRESS	CITY/STATE	ZIP CODE
PRESIDENT <u>Anthony J. DAMIANI</u>	<u>73 FRANCIS AVE</u>	<u>Pawt. RI</u>	<u>02860</u>
VICE PRESIDENT <u>Anthony J. DAMIANI</u>	<u>73 FRANCIS AVE</u>	<u>Pawt RI</u>	<u>02860</u>
SECRETARY <u>Anthony J. DAMIANI</u>	<u>73 FRANCIS AVE</u>	<u>Pawt. RI</u>	<u>02860</u>
TREASURER <u>Anthony J. DAMIANI</u>	<u>73 FRANCIS AVE</u>	<u>Pawt. RI</u>	<u>02860</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 (Rider may be attached)

Number of Shares

Class / Series

1000CommonNO PAR VALUE

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

Number of Shares

Class / Series

200CommonNO PAR VALUEDate 12/21, 19 94By: Anthony J. Damiani

PRINT OR TYPE NAME OF OFFICER SIGNING

ANTHONY J. DAMIANI

TITLE OF OFFICER SIGNING

PRESIDENT

Form 3: 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.

MR. FRANK MANSELLA
747 PONTIAC AVENUE #210
CRANSTON RI 02910JAN 3 1995
#1768

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: 0006932 Annual Report for the year: 1994

Name of Business Entity: Anthony Damiani, C.P.A., Inc.

Business entity organized under the laws of the State of RI

Federal Taxpayer Identification Number [REDACTED]

For 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)

747 Pontiac Ave # 210
CRANSTON RI 02910

Phone: (401) 461-3330

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:

Anthony J. Damiani
Anthony J. Damiani CPA, Inc.
747 Pontiac Ave # 210
CRANSTON, RI 02910

Brief statement of the character of business conducted in Rhode Island

Accounting Services

Date of Organization: 8/1/89

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

THE NAMES OF THE OFFICERS ARE:

	NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
☐ CHIEF EXECUTIVE OFFICER OR ☒ PRESIDENT (Check One)	<u>Anthony J. Damiani</u>	<u>73 Francis Ave</u>	<u>Pawt RI</u>	<u>02860</u>
☐ CHIEF FINANCIAL OFFICER OR ☒ VICE PRESIDENT (Check One)	<u>Anthony J. Damiani</u>	<u>73 Francis Ave</u>	<u>Pawt RI</u>	<u>02860</u>
☐ CUSTODIAN OF RECORDS OR ☐ SECRETARY (Check One)	<u>Anthony J. Damiani</u>	<u>73 Francis Ave</u>	<u>Pawt RI</u>	<u>02860</u>
☐ CHIEF FINANCIAL OFFICER OR ☒ TREASURER (Check One)	<u>Anthony J. Damiani</u>	<u>73 Francis Ave</u>	<u>Pawt RI</u>	<u>02860</u>

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE

NUMBER OF SHARES AUTHORIZED (If Applicable)

NUMBER 1000
CLASS Common
SERIES

PAR VALUE OR WITHOUT PAR NO Par Value

NUMBER OF SHARES ISSUED AND OUTSTANDING (If Applicable)

NUMBER 200
CLASS Common
SERIES

PAR VALUE OR WITHOUT PAR NO Par Value

Date 1/21, 19 94

By: ay. J. M.

Anthony J. Damiani
PRINT OR TYPE NAME OF OFFICER SIGNING
President
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.

MR. FRANK MANSELLA
747 PONTIAC AVENUE
CRANSTON RI 02910

Filing Fee \$50.00

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

78093
State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0056932 Annual Report for the year 1993

FIRST: The name of the corporation is Anthony Damiani, C.P.A., Inc.

SECOND: It is incorporated under the laws of RHODE ISLAND

THIRD: Character of business, briefly stated, is Accounting Firm

FOURTH: If foreign corporation, address of its principal office N/A

FIFTH: Business address in Rhode Island 747 Pontiac Ave #210
Cranston, RI 02910

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>73 FRANCIS AVE, Pawt RI 02860</u>	President	<u>Anthony J. Damiani</u>
<u>✓</u>	Vice President	<u>Anthony J. Damiani</u>
<u>✓</u>	Secretary	<u>Anthony J. Damiani</u>
<u>✓</u>	Treasurer	<u>Anthony J. Damiani</u>

SEVENTH: Number of Shares authorized:

No. of Shares 1000 Class Common

Series **PAID**

Par Value
or statement that
shares are without
par value

JAN 21 1993

NO Par Value

EIGHTH: Number of Shares issued:

No. of Shares 200 Class Common

SEC'y OF STATE

Series

Par Value
or statement that
shares are without
par value

NO Par Value

Dated 11/20 19 93 Anthony J. Damiani, Inc.
(Name of Corporation)

By Anthony J. Damiani
Title PRESIDENT

(Report must be signed by an officer)

Filing Fee \$50.00

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

C.S. 41
72551

Corporate ID 0055932 Annual Report for the year 1992

FIRST: The name of the corporation is Anthony Damiani, C.P.A., Inc.

SECOND: It is incorporated under the laws of RHODE ISLAND

THIRD: Character of business, briefly stated, is ACCOUNTING FIRM

FOURTH: If foreign corporation, address of its principal office. N/A

FIFTH: Business address in Rhode Island 747 Pontiac Ave #210
CRANSTON, RI 02910

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>73 FRANKIS AVE Pawt. Rt</u> <u>02860</u>	President	<u>Anthony J. DAMIANI</u>
<u>✓</u>	Vice President	<u>Anthony J. DAMIANI</u>
<u>✓</u>	Secretary	<u>Anthony J. DAMIANI</u>
<u>✓</u>	Treasurer	<u>Anthony J. DAMIANI</u>

SEVENTH: Number of Shares authorized:

No. of Shares

Class

PAID

Par Value
or statement that
shares are without
par value

1000

Common

JAN 24 1992

NO PAR VALUE

SEC'y OF STATE

EIGHTH: Number of Shares issued:

No. of Shares

Class

Series

Par Value
or statement that
shares are without
par value

200

Common

NO PAR VALUE

Dated 1/24 19 92 Anthony J. Damiani, CPA, INC.
(Name of Corporation)

By Anthony J. Damiani

Title President

(Report must be signed by an officer)

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903Corporate ID 0056932 Annual Report for the year 1991FIRST: The name of the corporation is DAMIANI & MANSELLA, INC.SECOND: It is incorporated under the laws of Rhode IslandTHIRD: Character of business, briefly stated, is Professional services - accountingFOURTH: If foreign corporation, address of its principal office N/AFIFTH: Business address in Rhode Island 747 Pontiac Ave
CRANSTON RI 02910

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

Name

Office

Address (including number, street, zip code)

Director

Director

Director

Anthony J. DAMIANI President73 FRANCIS Ave. Pawtucket RIAnthony J. DAMIANI Vice President73 FRANCIS Ave. Pawtucket RIAnthony J. DAMIANI Secretary73 FRANCIS Ave. Pawtucket RIAnthony J. DAMIANI Treasurer73 FRANCIS Ave. Pawtucket RI

SEVENTH: Number of Shares authorized:

No. of Shares

Class

Series

Par Value
or statement that
shares are without
par value1,000CommonPAIDNO PAR VALUE

EIGHTH: Number of Shares issued:

No. of Shares

Class

Series

Par Value
or statement that
shares are without
par value200CommonRECEIVEDNo par valueDated 1/03 1991DAMIANI & MANSELLA, INC.

(Name of Corporation)

By Anthony J. DamianiTitle President

(Report must be signed by an officer)

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

CZ

Corporate ID 0058932 Annual Report for the year 1990

FIRST: The name of the corporation is DAMIANI & MANSELLA, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is Professional services - accounting

FOURTH: If foreign corporation, address of its principal office N/A

FIFTH: Business address in Rhode Island 747 Pontiac Ave. #210
CRANSTON RI 02910

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

Name

Office

Address (including number, street, zip code)

Director

Director

Director

FRANK S. MANSELLA President

54 Lowell St. CRANSTON, RI 02910

Anthony J. DAMIANI Vice President

73 FRANCIS Ave. Pawtucket RI

FRANK S. MANSELLA Secretary

54 Lowell St. CRANSTON, RI 02910

Anthony J. DAMIANI Treasurer

73 FRANCIS Ave. Pawtucket RI

SEVENTH: Number of Shares authorized:

No. of Shares

Class

Series

Par Value
or statement that
shares are without
par value

1,000

Common

no par value

EIGHTH: Number of Shares issued:

No. of Shares

Class

Series

Par Value
or statement that
shares are without
par value

200

Common

no par value

Dated January 27, 1990

DAMIANI & MANSELLA, INC.
(Name of Corporation)

By

Frank S. Mansella

Title

President

(Report must be signed by an officer)