



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  
401 222-3640

# 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 130636	2. Name of Corporation Atlas Vending, Inc.	3. Street Address Principal Business Office 1106 North Main Street	City Providence	State RI	Zip 02904
4. Business Phone No (401) 421-9363	5. State of Incorporation Rhode Island	6. SIC Code 3053			

7. Brief Description of the Character of Business Conducted in Rhode Island  
To provide services for the sale, leasing and operation of coin vending machines.

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

President Name Eric Parrillo	Vice President Name Joseph Porrazzo
Street Address 1961 Cranston Street	Street Address 15 Willcroft Street
City Cranston	City Cumberland
State RI	State RI
Zip 02920	Zip 02864
Secretary Name Eric Parrillo	Treasurer Name Joseph Porrazzo
Street Address 1961 Cranston Street	Street Address 15 Willcroft Street
City Cranston	City Cumberland
State RI	State RI
Zip 02920	Zip 02864

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

Director Name Eric Parrillo	Director Name Joseph Porrazzo
Street Address 1961 Cranston Street	Street Address 15 Willcroft Street
City Cranston	City Cumberland
State RI	State RI
Zip 02920	Zip 02864

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
2,000	NO 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



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FILED

File Date MAR 09 2005

Check No. By *ce*

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.

*Eric Parrillo*  
Signature of Officer

2/21/05  
Date

Eric Parrillo  
Print or Type Name of Officer

President  
Title of Officer



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7. Brief Description of the Character of Business Conducted in Rhode Island To provide services for the sale, leasing and operation of coin vending machines.					
8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Eric Parrillo			Vice President Name Joseph Porrazzo		
Street Address 1961 Cranston Street			Street Address 15 Willcroft Street		
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Street Address 1961 Cranston Street			Street Address 15 Willcroft Street		
City Cranston	State RI	Zip	City Cumberland	State RI	Zip
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Director Name Eric Parrillo			Director Name Joseph Porrazzo		
Street Address 1961 Cranston Street			Street Address 15 Willcroft Street		
City Cranston	State RI	Zip	City Cumberland	State RI	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
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1 3 0 6 3 6

File Date 3/13/04  
Check No. 1914  
By: U  
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.

Eric Parrillo 3/8/04  
Signature of Officer Date  
Eric Parrillo ERIC PARRILLO  
Print or Type Name of Officer  
President PRESIDENT  
Title of Officer