



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. 1638		2. Name of Corporation AUTO GRAPHICS, INC.			
3. Street Address Principal Business Office 225B GEORGE WATERMAN RD.		City JOHNSTON	State RI	Zip 02919	
4. Business Phone No. 401-233-0075		5. State of Incorporation RHODE ISLAND		6. SIC Code 0	
7. Brief Description of the Character of Business Conducted in Rhode Island AUTO TRIM DESIGN AND GLASS TINTING					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name DOMENIC J ARGENTI		Vice President Name DOMENIC J ARGENTI			
Street Address 33 BEECHNUT DRIVE		Street Address 33 BEECHNUT DRIVE			
City JOHNSTON	State RI	Zip 02919	City JOHNSTON	State RI	Zip 02919
Secretary Name LORI A ARGENTI		Treasurer Name DOMENIC J ARGENTI			
Street Address 33 BEECHNUT DRIVE		Street Address 33 BEECHNUT DRIVE			
City JOHNSTON	State RI	Zip 02919	City JOHNSTON	State RI	Zip 02919
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name DOMENIC J ARGENTI		Director Name NONE			
Street Address 33 BEECHNUT DRIVE		Street Address			
City JOHNSTON	State RI	Zip 02919	City	State	Zip
Director Name NONE		Director Name NONE			
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"/>
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
100 NO PAR VALUE			100		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 1/25/05
Check No. 2539
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 1-10-05
Print or Type Name of Officer DOMENIC J ARGENTI
Title of Officer PRESIDENT



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. 1638		2. Name of Corporation AUTO GRAPHICS, INC.			
3. Street Address Principal Business Office 225B GEORGE WATERMAN RD.		City JOHNSTON	State RI	Zip 02919	
4. Business Phone No. 401-233-0075		5. State of Incorporation RHODE ISLAND			6. SIC Code 0
7. Brief Description of the Character of Business Conducted in Rhode Island AUTO TRIM DESIGN AND GLASS TINTING					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name DOMENIC J. ARGENTI			Vice President Name DOMENIC J. ARGENTI		
Street Address 33 BEECHNUT DRIVE			Street Address 33 BEECHNUT DRIVE		
City JOHNSTON	State RI	Zip 02919	City JOHNSTON	State RI	Zip 02919
Secretary Name LORI A ARGENTI			Treasurer Name DOMENIC J. ARGENTI		
Street Address 33 BEECHNUT DRIVE			Street Address 33 BEECHNUT DRIVE		
City JOHNSTON	State RI	Zip 02919	City JOHNSTON	State RI	Zip 02919
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name DOMENIC J. ARGENTI			Director Name NONE		
Street Address 33 BEECHNUT DRIVE			Street Address		
City JOHNSTON	State RI	Zip 02919	City	State	Zip
Director Name NONE			Director Name NONE		
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"/>		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
100 NO PAR VALUE			100		

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



* 1 6 3 8 *

File Date 1-9-04
Check No. 2377
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

Date

DOMENIC J ARGENTI

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.

1638

2. Name of Corporation

AUTO GRAPHICS, INC.

3. Street Address Principal Business Office

225B GEORGE WATERMAN RD.

City

JOHNSTON

State

RI

Zip

02919

4. Business Phone No.

5. State of Incorporation

RHODE ISLAND

6. SIC Code

0

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

TIN STRIPING & GLASS TINTING

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

FILL IN SPACES BEFORE USING ATTACHMENTS

President Name

DOMENIC J ARGENTI

Street Address

33 BEECHNUT DRIVE

JOHNSTON RI 02919

Vice President Name

DOMENIC J ARGENTI

Street Address

33 BEECHNUT DRIVE

JOHNSTON RI 02919

Secretary Name

LORI A ARGENTI

Street Address

33 BEECHNUT DRIVE

JOHNSTON RI 02919

Treasurer Name

DOMENIC J ARGENTI

Street Address

33 BEECHNUT DRIVE

JOHNSTON RI 02919

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

FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

DOMENIC J ARGENTI

Street Address

33 BEECHNUT DRIVE

JOHNSTON RI 02919

Director Name

NONE

Street Address

Director Name

NONE

Street Address

Director Name

NONE

Street Address

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

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

100 NO PAR VALUE

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

ISSUED SHARES

Number of Shares

Class/Series

Par Value

100

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



* 1 6 3 8 *

File Date: 1-29-03

Check No.: 2195

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: DOMENIC J ARGENTI Date: 1-27-03

Print or Type Name of Officer

PRESIDENT

Title of Officer

5



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. 1638		2. Name of Corporation AUTO GRAPHICS, INC.			
3. Street Address Principal Business Office 225 B GEORGE WATERMAN RD.		City JOHNSTON	State R.I.	Zip 02919	
4. Business Phone No. 401-233-0075	5. State of Incorporation RHODE ISLAND		6. SIC Code 0		
7. Brief Description of the Character of Business Conducted in Rhode Island AUTO TRIM DESIGN & INSTALLATION, GLASS TINTING					
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name DOMENIC S ARGENTI		Vice President Name DOMENIC S ARGENTI			
Street Address 33 BEECHNUT DRIVE		Street Address 33 BEECHNUT DRIVE			
City JOHNSTON	State RI	Zip 02919	City JOHNSTON	State RI	Zip 02919
Secretary Name LORI A ARGENTI		Treasurer Name DOMENIC S ARGENTI			
Street Address 33 BEECHNUT DRIVE		Street Address 33 BEECHNUT DRIVE			
City JOHNSTON	State RI	Zip 02919	City JOHNSTON	State RI	Zip 02919
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name DOMENIC S ARGENTI		Director Name SAME			
Street Address 33 BEECHNUT DRIVE		Street Address SAME			
City JOHNSTON	State RI	Zip 02919	City 	State 	Zip
Director Name SAME		Director Name SAME			
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
100 NO PAR VALUE			100		NO PAR

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



* 1 6 3 8 *

FILED

File Date: **FEB 06 2002**

Check No.: **By 2002 280346**

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.

Signature of Officer **DOMENIC S ARGENTI** Date **2/5/02**
Print or Type Name of Officer
PRESIDENT
Title of Officer
5



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. 1638 2. Name of Corporation AUTO GRAPHICS, INC.
3. Street Address Principal Business Office 225B GEORGE WATERMAN ROAD City JOHNSTON State RI Zip 02919
4. Business Phone No. 401-233-0075 5. State of Incorporation RHODE ISLAND 6. SIC Code 0

7. Brief Description of the Character of Business Conducted in Rhode Island
AUTO TRIM DESIGN & GLASS TINTING

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

President Name <u>DOMENIC P ARGENTI</u>	Vice President Name <u>SAME</u>
Street Address <u>33 BEECHNUT DRIVE</u>	Street Address <u>SAME</u>
City <u>JOHNSTON</u> State <u>RI</u> Zip <u>02919</u>	City <u>SAME</u> State <u>RI</u> Zip <u>02919</u>
Secretary Name <u>SAME</u>	Treasurer Name <u>SAME</u>
Street Address <u>SAME</u>	Street Address <u>SAME</u>
City <u>JOHNSTON</u> State <u>RI</u> Zip <u>02919</u>	City <u>SAME</u> State <u>RI</u> Zip <u>02919</u>

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

Director Name <u>SAME</u>	Director Name <u>SAME</u>
Street Address <u>SAME</u>	Street Address <u>SAME</u>
City <u>JOHNSTON</u> State <u>RI</u> Zip <u>02919</u>	City <u>SAME</u> State <u>RI</u> Zip <u>02919</u>
Director Name <u>SAME</u>	Director Name <u>SAME</u>
Street Address <u>SAME</u>	Street Address <u>SAME</u>
City <u>JOHNSTON</u> State <u>RI</u> Zip <u>02919</u>	City <u>SAME</u> State <u>RI</u> Zip <u>02919</u>

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

AUTHORIZED SHARES
Number of Shares Class/Series Par Value
100 NO PAR VALUE

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

ISSUED SHARES
Number of Shares Class/Series Par Value
100

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



* 1 6 3 8 *

File Date: 3-9-01
1814
Check No.: 2
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.

DOMENIC P ARGENTI 2/12/01
Signature of Officer Date
DOMENIC P ARGENTI
Print or Type Name of Officer
PRESIDENT
Title of Officer



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. 1638 2. Name of Corporation AUTO GRAPHICS, INC.
3. Street Address Principal Business Office 225B GEORGE WATERMAN RD JOHNSTON RI 02919
4. Business Phone No. 401-621-3800 5. State of Incorporation RHODE ISLAND
6. SIC Code
7. Brief Description of the Character of Business Conducted in Rhode Island AUTO TRIM & ACCESSORIES
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS
President Name DOMENIC S ARGENTI Vice President Name SAME
Street Address 33 BEACHNUT DRIVE Street Address
City JOHNSTON RI 02919 City State Zip
Secretary Name SAME Treasurer Name SAME
Street Address Street Address
City State Zip City State Zip

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS
Director Name DOMENIC S ARGENTI Director Name
Street Address 33 BEACHNUT DRIVE Street Address
City JOHNSTON RI 02919 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

100 NO PAR VALUE

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

ISSUED SHARES

Number of Shares Class/Series Par Value

100

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



* 1 6 3 8 *

File Date: 2/17/00

Check No.: 1593

By: DJM

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 DOMENIC S ARGENTI Date 2-9-00

Print or Type Name of Officer DOMENIC S ARGENTI

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 1999

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 1638		2. Name of Corporation AUTO GRAPHICS, INC.	
3. Street Address Principal Business Office 627 KILLINGLY ST.		City PROVIDENCE	State RI
4. Business Phone No. 401-621-3800		5. State of Incorporation RHODE ISLAND	6. SIC Code 0291
7. Brief Description of the Character of Business Conducted in Rhode Island AUTO TRAIL DESIGN			
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name DOMENIC S. ARGENTI		Vice President Name SAME	
Street Address 100 SUNFLOWER CIR.		Street Address	
City NO. PROV.	State RI	City	State
Zip 02911		Zip	
Secretary Name SAME		Treasurer Name SAME	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
Director Name SAME		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>		11. SHARES ISSUED (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>	
AUTHORIZED SHARES		ISSUED SHARES	
Number of Shares	Class/Series	Number of Shares	Class/Series
100 NO PAR VALUE	COMMON	100	COMMON
Par Value		Par Value	
NO		NO	

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



* 1 6 3 8 *

File Date: Jan 20, 99

Check No.: 1320

By: DD

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
DOMENIC S. ARGENTI
Date
1-2-99
Print or Type Name of Officer
DOMENIC S. ARGENTI
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.		2. Name of Corporation			
1638		AUTO-GRAPHICS, INC.			
3. Street Address Principal Business Office		City	State	Zip	
627 Killingly Street		Johnston	RI	02919	
4. Business Phone No.		5. State of Incorporation		6. SIC Code	
(401)273-0767		Rhode Island		8896	
7. Brief Description of the Character of Business Conducted in Rhode Island					
Automotive trim design.					
8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT)					
President Name		Vice President Name			
Domenic J. Argenti, Jr.		Domenic J. Argenti, Jr.			
Street Address		Street Address			
627 Killingly Street		627 Killingly Street			
City	State	City	State	Zip	
Johnston	RI	Johnston	RI	02919	
Secretary Name		Treasurer Name			
Domenic J. Argenti, Jr.		Domenic J. Argenti, Jr.			
Street Address		Street Address			
627 Killingly Street		627 Killingly Street			
City	State	City	State	Zip	
Johnston	RI	Johnston	RI	02919	
9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT)					
Director Name		Director Name			
Street Address		Street Address			
City	State	City	State	Zip	
Director Name		Director Name			
Street Address		Street Address			
City	State	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
100	Common	Without par value	100	Common	Without 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
OCT 25 1998
Check No.: 212372
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] 9-17-98
Signature of Officer Date
Domenic J. Argenti, Jr. AUTO-GRAPHICS, INC.
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 1997

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 1638 2. Name of Corporation AUTO-GRAPHICS, INC.
3. Street Address Principal Business Office City State Zip
627 Killingly Street Johnston RI 02919
4. Business Phone No. (401)273-0767 5. State of Incorporation Rhode Island 6. SIC Code 8896

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

Automotive trim design.

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

President Name	Vice President Name
Domenic J. Argenti, Jr.	Domenic J. Argenti, Jr.
Street Address	Street Address
627 Killingly Street	627 Killingly Street
City State Zip	City State Zip
Johnston RI 02919	Johnston RI 02919
Secretary Name	Treasurer Name
Domenic J. Argenti, Jr.	Domenic J. Argenti, Jr.
Street Address	Street Address
627 Killingly Street	627 Killingly Street
City State Zip	City State Zip
Johnston RI 02919	Johnston RI 02919

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

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)

AUTHORIZED SHARES		
Number of Shares	Class/Series	Par Value
100	Common	Without par value

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

ISSUED SHARES		
Number of Shares	Class/Series	Par Value
100	Common	Without 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.: **CCI 23 1998**
By: **213372**
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 **Domenic J. Argenti, Jr.** Date **9-17-98**
Print or Type Name of Officer **Domenic J. Argenti, Jr. AUTO-GRAPHICS, INC.**
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 1996

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **1638** 2. Name of Corporation **AUTO-GRAPHICS, INC.**
3. Street Address Principal Business Office **627 Killingly Street** City **Johnston** State **RI** Zip **02919**
4. Business Phone No. **(401)273-0767** 5. State of Incorporation **Rhode Island** 6. SIC Code **8896**

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

Automotive trim design.

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

President Name	Vice President Name
Domenic J. Argenti, Jr.	Domenic J. Argenti, Jr.
Street Address	Street Address
627 Killingly Street	627 Killingly Street
City	City
Johnston	Johnston
State	State
RI	RI
Zip	Zip
02919	02919
Secretary Name	Treasurer Name
Domenic J. Argenti, Jr.	Domenic J. Argenti, Jr.
Street Address	Street Address
627 Killingly Street	627 Killingly Street
City	City
Johnston	Johnston
State	State
RI	RI
Zip	Zip
02919	02919

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

Director Name	Director Name
Street Address	Street Address
City	City
State	State
Zip	Zip
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
100	Common	Without par value

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

ISSUED SHARES		
Number of Shares	Class/Series	Par Value
100	Common	Without par value

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

FILED
OCT 25 1998
Check No.:
By: **712372**
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.

Domenic J. Argenti, Jr. 9-17-98
Signature of Officer Date
Domenic J. Argenti, Jr. AUTO-GRAPHICS, INC.
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 1995

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **1638** 2. Name of Corporation **AUTO-GRAPHICS, INC.**
3. Street Address Principal Business Office **627 Killingly Street** City **Johnston** State **RI** Zip **02919**
4. Business Phone No. **(401)273-0767** 5. State of Incorporation **Rhode Island** 6. SIC Code **8896**

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

Automotive trim design.

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

President Name Domenic J. Argenti, Jr. Street Address 627 Killingly Street City Johnston State RI Zip 02919 Secretary Name Domenic J. Argenti, Jr. Street Address 627 Killingly Street City Johnston State RI Zip 02919	Vice President Name Domenic J. Argenti, Jr. Street Address 627 Killingly Street City Johnston State RI Zip 02919 Treasurer Name Domenic J. Argenti, Jr. Street Address 627 Killingly Street City Johnston State RI Zip 02919
--	---

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
---	---

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

AUTHORIZED SHARES		
Number of Shares	Class/Series	Par Value
100	Common	Without par value

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

ISSUED SHARES		
Number of Shares	Class/Series	Par Value
100	Common	Without par value

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

FILED

File Date: CCT 23 1998

Check No.: By 212372

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.

Domenic J. Argenti, Jr. 9-17-98
Signature of Officer Date
Domenic J. Argenti, Jr. AUTO-GRAPHICS, INC.
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 1994
Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 1638 2. Name of Corporation **AUTO-GRAPHICS, INC.**
3. Street Address Principal Business Office 627 Killingly Street City **Johnston** State **RI** Zip **02919**
4. Business Phone No. (401)273-0767 5. State of Incorporation **Rhode Island** 6. SIC Code **8896**

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

Automotive trim design.

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

President Name	Vice President Name
Domenic J. Argenti, Jr.	Domenic J. Argenti, Jr.
Street Address	Street Address
627 Killingly Street	627 Killingly Street
City	City
Johnston	Johnston
State	State
RI	RI
Zip	Zip
02919	02919
Secretary Name	Treasurer Name
Domenic J. Argenti, Jr.	Domenic J. Argenti, Jr.
Street Address	Street Address
627 Killingly Street	627 Killingly Street
City	City
Johnston	Johnston
State	State
RI	RI
Zip	Zip
02919	02919

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

Director Name	Director Name
Street Address	Street Address
City	City
State	State
Zip	Zip
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
100	Common
	Without par value

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

ISSUED SHARES	
Number of Shares	Class/Series
100	Common
	Without par value

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

FILED

File Date: **OCT 23 1998**
Check Number: **11149**
By: **12372**

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.

Domenic J. Argenti, Jr. 9-17-98
Signature of Officer Date
Domenic J. Argenti, Jr. **AUTO-GRAPHICS, INC.**
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 1993

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **1638** 2. Name of Corporation **AUTO-GRAPHICS, INC.**
3. Street Address Principal Business Office **627 Killingly Street** City **Johnston** State **RI** Zip **02919**
4. Business Phone No. **(401)273-0767** 5. State of Incorporation **Rhode Island** 6. SIC Code **8896**

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

Automotive trim design.

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

President Name	Vice President Name
Domenic J. Argenti, Jr.	Domenic J. Argenti, Jr.
Street Address	Street Address
627 Killingly Street	627 Killingly Street
City	City
Johnston	Johnston
State	State
RI	RI
Zip	Zip
02919	02919
Secretary Name	Treasurer Name
Domenic J. Argenti, Jr.	Domenic J. Argenti, Jr.
Street Address	Street Address
627 Killingly Street	627 Killingly Street
City	City
Johnston	Johnston
State	State
RI	RI
Zip	Zip
02919	02919

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

Director Name	Director Name
Street Address	Street Address
City	City
State	State
Zip	Zip
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
100	Common	Without par value

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

ISSUED SHARES		
Number of Shares	Class/Series	Par Value
100	Common	Without par value

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

FILED

File Date: **OCT 23 1998**

Check No.: **1314**

By: **6212372**

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.

Domenic J. Argenti, Jr. **9-17-98**
Signature of Officer Date

Domenic J. Argenti **AUTO-GRAPHICS, INC.**

Print or Type Name of Officer

President

Title of 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

Corporate ID 1638 Annual Report for the year 1992

FIRST: The name of the corporation is AUTO-GRAPHICS, INC.

SECOND: It is incorporated under the laws of RHODE ISLAND

THIRD: Character of business, briefly stated, is AUTOMOTIVE TRIM DESIGN

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

FIFTH: Business address in Rhode Island 383 Trimtown Road No. Scituate, RI 02857

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

Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
Domenic J. Argenti, Jr.	President	383 Trimtown Road No. Scituate, RI 02857
Judith L. Argenti	Vice President	383 Trimtown Road No. Scituate, RI 02857
	Secretary	
Domenic J. Argenti, Jr.	Treasurer	383 Trimtown Road No. Scituate, RI 02857

SEVENTH: Number of Shares authorized:

No. of Shares	Class
100	

PAID
DEC 24 1992

Par Value
or statement that
shares are without
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

Dated January 19 92

AUTO-GRAPHICS, INC.
(Name of Corporation)

By Judith L. Argenti

Title Vice 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

Corporate ID 1638 Annual Report for the year 1991

FIRST: The name of the corporation is AUTO-GRAPHICS, INC.

SECOND: It is incorporated under the laws of RHODE ISLAND

THIRD: Character of business, briefly stated, is AUTOMOTIVE TRIM DESIGN

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

FIFTH: Business address in Rhode Island 383 Trimtown Road No. Scituate, RI 02857

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

Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
Domenic J. Argenti, Jr.	President	383 Trimtown Road No. Scituate, RI 02857
Judith L. Argenti	Vice President	383 Trimtown Road No. Scituate, RI 02857
	Secretary	
Domenic J. Argenti, Jr.	Treasurer	383 Trimtown Road No. Scituate, RI 02857

SEVENTH: Number of Shares authorized:

No. of Shares	Class
100	

Series

Par Value
or statement that
shares are without
par value

PAID

DEC 24 1992

SECY OF STATE

Series

Par Value
or statement that
shares are without
par value

EIGHTH: Number of Shares issued:

No. of Shares	Class
---------------	-------

Dated January 19 91

AUTO-GRAPHICS, INC.

(Name of Corporation)

By

Judith L. Argenti

Title Vice 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

Corporate ID 1638 Annual Report for the year 1990

FIRST: The name of the corporation is AUTO-GRAPHICS, INC.

SECOND: It is incorporated under the laws of RHODE ISLAND

THIRD: Character of business, briefly stated, is AUTOMOTIVE TRIM DESIGN

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

FIFTH: Business address in Rhode Island 383 Trintown Road No. Scituate, RI 02857

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

Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
Domenic J. Argenti, Jr.	President	383 Trintown Road No. Scituate, RI 02857
Judith L. Argenti	Vice President	383 Trintown Road No. Scituate, RI 02857
	Secretary	
Domenic J. Argenti, Jr.	Treasurer	383 Trintown Road No. Scituate, RI 02857

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100			

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
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PAID 100.00
DEC 26 1992
SECY OF STATE

Dated January 19 90

AUTO-GRAPHICS, INC.
(Name of Corporation)

By Judith L. Argenti
Vice President

Title Vice 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

Corporate ID 1638

Annual Report for the year 1989

FIRST: The name of the corporation is AUTO-GRAPHICS, INC.

SECOND: It is incorporated under the laws of RHODE ISLAND

THIRD: Character of business, briefly stated, is AUTOMOTIVE TRIM DESIGN

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

FIFTH: Business address in Rhode Island 383 Trimtown Road No. Scituate, RI 02857

SIXTH: Names and addresses of its directors and officers:

(Attach rider if necessary)

Name

Office

Address (including number, street, zip code)

Director

Director

Director

Domenic J. Argenti, Jr. President 383 Trimtown Road No. Scituate, RI 02857

Judith L. Argenti Vice President 383 Trimtown Road No. Scituate, RI 02857

Secretary

Domenic J. Argenti, Jr. Treasurer 383 Trimtown Road No. Scituate, RI 02857

SEVENTH: Number of Shares authorized:

No. of Shares

Class

Series

Par Value
or statement that
shares are without
par value

100

EIGHTH: Number of Shares issued:

No. of Shares

Class

Par Value
or statement that
shares are without
par value

Dated January 1989

AUTO-GRAPHICS, INC.

(Name of Corporation)

By

Judith L. Argenti

Title

Vice President

(Report must be signed by an officer)

Filing Fee \$15.00

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

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903

Corporate ID Annual Report for the year 1988

FIRST: The name of the corporation is AUTO GRAPHICS, INC.

SECOND: It is incorporated under the laws of the State of Rhode Island

THIRD: Character of business, briefly stated, is Automotive trim design on auto-
mobiles

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 383 Trimtown Road
North Scituate, Rhode Island 02857

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

Name

Office

Address (including number, street, zip code)

Director

Director

Director

Domenic J. Argenti, Jr. President

383 Trimtown Road North Scituate, RI 02857

Judith L. Argenti Vice President

383 Trimtown Road North Scituate, RI 02857

Secretary

Treasurer

SEVENTH: Number of Shares authorized:

No. of Shares

Class

Series

Par Value
or statement that
shares are without
par value

EIGHTH: Number of Shares issued:

No. of Shares

Class

Series

Par Value
or statement that
shares are without
par value

Dated July 28, 19 88

Auto-Grpahics, Inc.

(Name of Corporation)

By Judith L. Argenti

Title Vice President

(Report must be signed by an officer)

Filing Fee \$15.00

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

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903

1638

Corporate ID..... Annual Report for the year1988.....

FIRST: The name of the corporation is..... AUTO-GRAPHICS, INC.

SECOND: It is incorporated under the laws of..... the State of Rhode Island

THIRD: Character of business, briefly stated, is..... Automotive Trim Design

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

FIFTH: Business address in Rhode Island..... 383 Trimtown Road North Scituate, RI

.....02857.....

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

Name	Office	Address (including number, street, zip code)
Domenic J. Argenti, Jr.	Director	383 Trimtown Road No. Scituate, RI 02857
Judy L. Argenti	Director	383 Trimtown Road No. Scituate, RI 02857
	Director	
Domenic J. Argenti, Jr.	President	383 Trimtown Road No. Scituate, RI 02857
Judy L. Argenti	Vice President	383 Trimtown Road No. Scituate, RI 02857
	Secretary	
Domenic J. Argenti, Jr.	Treasurer	Same as above

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
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EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
---------------	-------	--------	---

PAID

MAR 30 1988

DEPT. OF STATE

Dated..... March 15, 1988.....

Auto-Graphics, Inc.

(Name of Corporation)

By..... Judy L. Argenti

Judy L. Argenti

Title..... Vice Pres.

Vice President

(Report must be signed by an officer)

Filing Fee \$15.00

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

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 1638 Annual Report for the year 1987

FIRST: The name of the corporation is AUTO GRAPHICS, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island

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

Name

Office

Address (including number, street, zip code)

Director

Director

Director

President

Judith L. Argenti Vice President RR#3 Box A-260 North Scituate, RI

Secretary

Treasurer

SEVENTH: Number of Shares authorized:

No. of Shares

Class

Series

Par Value
or statement that
shares are without
par value

EIGHTH: Number of Shares issued:

No. of Shares

Class

Series

Par Value
or statement that
shares are without
par value

PAID

JAN 29 1987

SECY OF STATE

MAR 13 1987

Lep

Dated January 20 19 87

(Report must be signed by an officer)

Auto-Graphics, Inc.
(Name of Corporation)

By Judy L. Argenti

Title Vice President

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903Corporate ID 1638 Annual Report for the year 1986FIRST: The name of the corporation is AUTO GRAPHICS, INC.SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is

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

FIFTH: Business address in Rhode Island

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

Name

Office

Address (including number, street, zip code)

..... Director

..... Director

..... Director

Domenic J. Argenti, Jr. President 615 Central Ave. Johnston, RI 02919Judith L. Argenti Vice President Same as above

..... Secretary

..... Treasurer

SEVENTH: Number of Shares authorized:

No. of Shares

Class

PAID

Series

Par Value
or statement that
shares are without
par value

APR - 9 1986

EIGHTH: Number of Shares issued: SEC'Y. OF STATE

No. of Shares

Class

Series

Par Value
or statement that
shares are without
par valueDated January 30 19 86

JUN 24 ENT'D

(Report must be signed by an officer)

(Name of Corporation)

By

Title

Auto-Graphics, Inc.Judith L. ArgentiVice President

Filing Fee \$15.00

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

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 1638 Annual Report for the year 1985

FIRST: The name of the corporation is AUTO GRAPHICS, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island

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

Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
Domenic T. Argenti, Jr.	President	615 CENTRAL AVE. JOHNSTON, RI 02919
JUDITH L. ARGENTI	Vice President	Same as above
Domenic T. Argenti, Jr.	Secretary	Same as above
Domenic T. Argenti, Jr.	Treasurer	Same as above

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
---------------	-------	--------	--

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
---------------	-------	--------	--

Dated February 22 19 85
L.R.
(Report must be signed by an officer)

Auto Graphics, Inc.
(Name of Corporation)
By Judith L. Argenti
Title Vice President

Form 31 1/85

RECEIVED MAR 1985

AUTO GRAPHICS, INC.
DOMENIC ARGENTI, JR.
615 CENTRAL AVENUE
JOHNSTON RI

Filing fee: \$15.00

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

State of Rhode Island and Providence Plantations
OFFICE OF THE SECRETARY OF STATE

Annual Report for the year 1984

FIRST: The name of the corporation is AUTO GRAPHICS, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is Installation of automotive products, including, but not limited to trim design, alarms, automotive equipment and accessories.

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island

615 Central Avenue, Johnston, Rhode Island

SIXTH: Names and addresses of its directors and officers:

(Addresses must include street and number, if any)

Name	Office	Address
	Director	
	Director	
	Director	
<u>Domenic Argenti</u>	President	<u>615 Central Avenue, Johnston, RI</u>
<u>Judith L. Argenti</u>	Vice President	<u>615 Central Avenue, Johnston, RI</u>
<u>Domenic Argenti</u>	Secretary	<u>615 Central Avenue, Johnston, RI</u>
<u>Domenic Argenti</u>	Treasurer	<u>615 Central Avenue, Johnston, RI</u>

(If additional space is needed, attach rider)

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	Common		No Par

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	Common	4	No Par

Dated: March 5, 1984

AUTO GRAPHICS, INC.

(Name of Corporation)
Domenic Argenti

By President

Title Domenic Argenti, President

(Report must be signed by an officer)

If the corporation has changed its registered office and/or its registered agent, Form #9 must be filed. Please contact Corporation Division for information. 277-3040