



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 IN BLACK)

1. Corporate ID No.

104340

2. Name of Corporation

Clinton Trading and Services, Inc.

3. Street Address Principal Business Office

43 PAINE AVENUE

City

CRANSTON

State

RI

Zip

02910-

4. Business Phone No.

4019418785

5. State of Incorporation

RHODE ISLAND

6. SIC Code

7476

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

JANITORIAL SERVICES AND TO OPERATE VENDING MACHINES

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

President Name

Abner Clinton

Street Address

43 Paine Avenue

City

Cranston

State

RI

Zip

02910

Vice President Name

Abner Clinton

Street Address

43 Paine Avenue

City

Cranston

State

RI

Zip

02910

Secretary Name

Abner Clinton

Street Address

43 Paine Avenue

City

Cranston

State

RI

Zip

02910

Treasurer Name

Abner Clinton

Street Address

43 Paine Avenue

City

Cranston

State

RI

Zip

02910

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

600 NO PAR VALUE

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

ISSUED SHARES

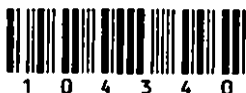
Number of Shares

Class/Series

Par Value

None

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



1 0 4 3 4 0

104340 DBC 02/21/05 08:24:08 PM

File Date

FILED

Check No.

APR 18 2005

By:

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

Abner Clinton

Print or Type Name of Officer

President

Title of Officer

Date

3/30/05



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 IN BLACK)

| | | | | | |
|---|--------------|--|------------------|---------------------|--------------|
| 1. Corporate ID No. 104340 | | 2. Name of Corporation Clinton Trading and Services, Inc. | | | |
| 3. Street Address Principal Business Office 43 PAINE AVENUE | | City CRANSTON | State RI | Zip 02910- | |
| 4. Business Phone No. 4019418785 | | 5. State of Incorporation RHODE ISLAND | | 6. SIC Code 7476 | |
| 7. Brief Description of the Character of Business Conducted in Rhode Island JANITORIAL SERVICES AND TO OPERATE VENDING MACHINES | | | | | |
| 8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS | | | | | |
| President Name Abner Clinton | | Vice President Name Abner Clinton | | | |
| Street Address 43 Paine Avenue | | Street Address 43 Paine Avenue | | | |
| City Cranston | State RI | Zip 02910 | City Cranston | State RI | Zip 02910 |
| Secretary Name Abner Clinton | | Treasurer Name Abner Clinton | | | |
| Street Address 43 Paine Avenue | | Street Address 43 Paine Avenue | | | |
| City Cranston | State RI | Zip 02910 | City Cranston | State RI | Zip 02910 |
| 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> 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) <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 |
| 600 | NO PAR VALUE | | None | Common | No Par |

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



1 0 4 3 4 0

104340 DBC 01/16/04 04:31:10 PM

File Date 3/1/04

Check No. 2217

By: SC

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 3/5/04
Abner Clinton
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 IN BLACK)

| | | | | | |
|---|--------------|--|------------------|---------------|---------------------|
| 1. Corporate ID No. *104340* | | 2. Name of Corporation Clinton Trading and Services, Inc. | | | |
| 3. Street Address Principal Business Office 43 PAINE AVENUE | | City CRANSTON | State RI | Zip 02910- | |
| 4. Business Phone No. 401 9418785 | | 5. State of Incorporation RHODE ISLAND | | | 6. SIC Code 7476 |
| 7. Brief Description of the Character of Business Conducted in Rhode Island JANITORIAL SERVICES AND TO OPERATE VENDING MACHINES | | | | | |
| 8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS | | | | | |
| President Name ABNER CLINTON | | Vice President Name ABNER CLINTON | | | |
| Street Address 43 PAINE AVE | | Street Address 43 PAINE AVENUE | | | |
| City CRANSTON | State RI | Zip 02910 | City CRANSTON | State RI | Zip 02910 |
| Secretary Name ABNER CLINTON | | Treasurer Name ABNER CLINTON | | | |
| Street Address 43 PAINE AVENUE | | Street Address 43 PAINE AVENUE | | | |
| City CRANSTON | State RI | Zip 02910 | City CRANSTON | State RI | Zip 02910 |
| 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> 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) <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 |
| 600 NO PAR VALUE | | | NONE | | |

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



**104340* 1/14/03 12:37:01 PM*
File Date 3-20-03
Check No. 1846
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] 2/28/2003
Signature of Officer Date
ABNER CLINTON
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 2002

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.

104340

2. Name of Corporation

Clinton Trading and Services, Inc.

3. Street Address Principal Business Office

43 Paine Avenue

City

Cranston

State

RI

Zip

02910

4. Business Phone No.

401-941-8785

5. State of Incorporation

RHODE ISLAND

6. SIC Code

7476/3038

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

To provide janitorial services and to operate various vending

8. ~~machines and any other law for business in the State of Rhode Island~~ FILL IN SPACES BEFORE USING ATTACHMENTS

President Name

Abner Clinton

Vice President Name

Abner Clinton

Street Address

43 Paine Avenue

Street Address

43 Paine Avenue

City

Cranston

State

RI

Zip

02910

City

Cranston

State

RI

Zip

02910

Secretary Name

Abner Clinton

Treasurer Name

Abner Clinton

Street Address

43 Paine Avenue

Street Address

43 Paine Avenue

City

Cranston

State

RI

Zip

02910

City

Cranston

State

RI

Zip

02910

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

Director Name

NONE

Director Name

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

600 NO PAR VALUE

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

ISSUED SHARES

Number of Shares

Class/Series

Par Value

NONE

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



* 1 0 4 3 4 0 *

File Date: 3-6-02

Check No.: 1259

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

Abner Clinton

Print or Type Name of Officer

President

Title of Officer

Date

2/9/2002



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. 104340 2. Name of Corporation Clinton Trading and Services, Inc.

3. Street Address Principal Business Office 43 Paine Avenue City Cranston State RI Zip 02910
4. Business Phone No. 401- 5. State of Incorporation RHODE ISLAND 6. SIC Code 0

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

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) To provide janitorial services and to operate various vending machines and any other lawful business in the State of Rhode Island
Fill in spaces before using attachments

| | | | | | | | |
|----------------------|------------------------|-----------|--------------|----------------------|------------------------|-----------|--------------|
| Street Address | City | State | Zip | Street Address | City | State | Zip |
| <u>Abner Clinton</u> | <u>43 Paine Avenue</u> | <u>RI</u> | <u>02910</u> | <u>Abner Clinton</u> | <u>43 Paine Avenue</u> | <u>RI</u> | <u>02910</u> |
| Director Name | Secretary Name | | | Treasurer Name | | | |

| | | | | | | | |
|----------------------|------------------------|-----------|--------------|----------------------|------------------------|-----------|--------------|
| Street Address | City | State | Zip | Street Address | City | State | Zip |
| <u>Abner Clinton</u> | <u>43 Paine Avenue</u> | <u>RI</u> | <u>02910</u> | <u>Abner Clinton</u> | <u>43 Paine Avenue</u> | <u>RI</u> | <u>02910</u> |
| Director Name | | | | Director Name | | | |

| | | | | | | | |
|----------------|------|-------|-----|----------------|------|-------|-----|
| Street Address | City | State | Zip | Street Address | City | State | Zip |
| <u>NONE</u> | | | | | | | |
| Director Name | | | | Director Name | | | |

| | |
|--|--|
| 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 | Class/Series |
| Par Value | Par Value |
| <u>600 NO PAR VALUE</u> | <u>NONE</u> |

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



* 1 0 4 3 4 0 *

File Date: 2/13

Check No.: 10390

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 1/29/01

Abner Clinton
Print or Type Name of Officer

President
Title of Officer



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 2. Name of Corporation

104340

Clinton Trading and Services, Inc.

3. Street Address Principal Business Office

43 Paine Avenue

City

Cranston

State

RI

Zip

02910

4. Business Phone No.

401-

5. State of Incorporation

Rhode Island

6. SIC Code

7. Brief Description of the Character of Business Conducted in Rhode Island to provide janitorial services and to operate various vending machines and any other lawful business in the State of RI

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

President Name

Abner Clinton

Vice President Name

Abner Clinton

Street Address

43 Paine Avenue

Street Address

43 Paine Avenue

City

Cranston

State

RI

Zip

02910

City

Cranston

State

RI

Zip

02910

Secretary Name

Abner Clinton

Treasurer Name

Abner Clinton

Street Address

43 Paine Avenue

Street Address

43 Paine Avenue

City

Cranston

State

RI

Zip

02910

City

Cranston

State

RI

Zip

02910

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

600 SHARES NO PAR VALUE

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

ISSUED SHARES

Number of Shares

Class/Series

Par Value

NONE

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

File Date: 9-18-00

Check No.: 1607

By: AMF

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

Abner Clinton

Print or Type Name of Officer

President

Title of Officer

Date

9/12/00