



(FORM MUST BE TYPED IN BLACK)

FOR SECRETARY OF STATE USE ONLY

Matthew A. Brown, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

Form 630 12/01

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005 Filing Period: January 1 - March 1 • Filing Fee: \$50.00

I. Corporate ID No. 2. Name of Corporation 81848 A.F.M. Limited 3. Street Address Principal Business Office State Zip 1060 PARK AVENUE CRANSTON RI 02910 4. Business Phone No. 5. State of Incorporation 6. SIC Code 4014644800 RHODE ISLAND 5884 7. Brief Description of the Character of Business Conducted in Rhode Island TO ENGAGE IN THE WHOLESALE OR RETAIL SALE AND DISTRIBUTION OF GOODS OF EVERY KIND AND DESCRIPTION. 8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) IN SPACES BEFORE USING ATTACHMENTS Vice President Name Dennis M. Nichols Street Address Street Address 1060 Park Avenue City State Zip City State Zip Cranston RΙ 02910 Secretary Name Treasurer Name Dennis M. Nichols Dennis M. Nichols Street Address Street Address 1060 Park Avenue .1060 Park Avenue City State Zip City State Cranston RT 02910 Cranston RI 02910 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR AT TACHMENT). I FILL, IN SPACES BEFORE USING ATTACHMENTS Director Name Director Name Dennis M. Nichols Street Address Sireel Address 1060 Park Avenue City State Zip ·City State Zip Cranston RI 02910 Director Name Director Name Street Address Sireei Address State .C.5 Zio State Zio 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 8,000 COMM \$1.00 PAR VALUE 100 COMMON \$1.00 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. *81848 DBC 01/06/05 10:37:26 AM*

ATTACHMENT
2005 ANNUAL REPORT
A.F.M. Limited
CORPORATE ID: 81848

ADDITIONAL OFFICERS ITEM 8.

TITLE

2.7 ...

<u>NAME</u>

ADDRESS

Assistant Secretary

Dennis M. Nichols 1060 Park Avenue, Cranston, RI 02910

ANNRPTATTAC1/6/200510:55 AM



Matthew A. Brown, Secretary of State Corporations Division 100 North Matn Street, Providence, RI 02903-1335 401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

I. Corporate ID No 81848	2. Name of Corpor A.F.M. Limite				
3. Street Address Principal Busin		;u 	City	State	Zip
1060 Park Avenue	cas Office		Cranston	RI	02910
4. Business Phone No.	······	5. State of Incorpora			6. SIC Code
401-464-4800		Rhode Island			5884
7. Brief Description of the Chara	-4(Q/ C	1		· · · · · · · · · · · · · · · · · · ·	
			stribution of goods o	f every kind and de	escription
8. NAMES AND ADDRESS President Name	SES OF THE OFF	ICERS ("X" BOX FOR	ATTACHMENT) FILL IN SE	ACES BEFORE USING AT	FACHMENTS
Dennis M. Nichols			•		
Sircet Address			Street Address		
1060 Park Avenue			•		
Cin [,]	State	Zip	City:	State	Zip
Cranston	RI	02910	•		1
ecretary Name	• • • • • • •		Treasurer Name	• • • • • • • • • • • • • • • • • • • •	
Dennis M. Nichols			Dennis M. Nicho	ols	
Sireei Address		· · · · · · · · · · · · · · · · · · ·	* Street Address		
1060 Park Avenue		1060 Park Avenu	.1060 Park Avenue		
Ciry:	State	Zip	*City	State	Zip
Cranston	RI	02910	. Cranston	RI	02910
9. NAMES AND ADDRESS Director Name	ES OF THE DIR	ECTORS ("X" BOX FO	ORATTACHMENT) FILL IN	SPACES BEFORE USING	TTACHMENTS
Dennis M. Nichols			•		
Street Address			· Street Address		
1060 Park Avenue			+ Cirk Ex Study Edd		
City	State	Zip	· City	State	Zip
Cranston	RI	02910	·	LA DIE	100
Director Name	J	13777	Director Name		
Street Address		,	· Sireei Address		
			•		
City	State	Zip	.City	State	Zip
10. SHARES AUTHORIZE	D ("X" BOX FOR	ATTACHMENT)	11. SHARES ISSUED ("	X" BOX FOR ATTACHMENT	n 🗆
AUTHORIZED SHARES			ISSUED SHARES		7
Yumber of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
	ar Value		100	Commod	\$1.00
8,000 Common \$1.00 Pa			1	CONTROL	

FILED

File Date

JAN 23 2004

Check No.

By YNV 1574

By:

FOR SECRETARY OF STATE USE ONLY



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 2003

Filing Period: January 1		Filing Fee: \$50.00			<u> </u>	
(FORM MUST BE TYPED IN I	BLACK) 2. Name of Corp					
81848	A.F.M. Limi					
3. Street Address Principal Busin 1060 PARK AVENUE	ness Office	· · · · · · · · · · · · · · · · · · ·	City CRANSTON	State RI	Zip 02910	
4. Business Phone No. 4014644800		5. State of Incorpora			6. SIC Code	
	(0				5884	
TO ENGAGE IN THE WH	ocies of Husiness Co OLESALE OR R	enducted in Rhode Island ETAIL SALE AND DI	STRIBUTION OF GOODS	OF EVERY KIND AN	D DESCRIPTION.	
8. NAMES AND ADDRES President Name Dennis Nichols	SES OF THE OF	FICERS ("X" BOX FOR	ATTACHMENT) FILL IN S	PACES BEFORE USING	GATTACHMENTS	
Sircei Address				 _		
1060 Park Avenue			Street Address			
City	State	Zip	City	State	Zip	
Cranston	RI	02910	•		[
Secretary Name			Treasurer Name			
Street Address		·	Street Address		······	
City	State	Zip	*City			
·	<u> </u>		•	State	Zip	
9. NAMES AND ADDRESS Director Name	SES OF THE DIE	RECTORS ("X" BOX FO	RATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Director Name			
Dennis Nichols			•			
Sireei Address			Street Address			
1060 Park Avenue			·			
City	State	Zip	·Ciny	State	Zip	
Cranston	RI	02910	· · · · · · · · · · · · · · · · · · ·	. 		
Director Name			Director Name			
Street Address			Sireei Address			
City	State	Zip	.Ciry	State	Zip	
10. SHARES AUTHORIZE	ED ("X" BOX FOR	ATTACHMENT)		X" BOX FOR ATTACHM	IENT)	
AUTHORIZED SHARES			ISSUED SHARES			
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value	
8,000 COMM \$1.00 PAF	RVALUE		8,000		الله ا. س	
This report must be signe	d in ink by eith	er the President, Vice	President, Secretary, Assi	istant Secretory Tree	asurer, Receiver or Trustee	
,			r conditing occidency, 7133	siant becretary, Tree	dsurer, Receiver or Trustee	
1 16 P 16 16 16 16 16 16 1	I (B)(8 B) B B I 18() 18 B P					
	! 					
			Linder penalty of pe	rium I declare and affir	m that I have examined	
- 0 1	B 4 0 *		this report, including	g any accompanying sci	hedules and statements	
*84040 DDC0440000.00	.04 DM			nts contained herein are		
*81848 DBC3/4/032:33	_					
File Date 3 \ \ - 9	3 }	_	(C) mars	Michols	Date Date	
70	n		Signature of Officer	Theres	Date .	
Check No. 394	27	_	Ďennis Nicl	hols		
	truc		Print or Type Name of			
В <u>у:</u>	7,000					
FOR SECRETARY OF STATE	USE ONLY		President			
			Title of Officer		Form 630 12/01	

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 I-March 1 • Filing Fee: \$50.00

STOP PLEASE READ INSTRUCTIONS

(FORM MUST BE TYPED IN B	LACK)				
1. Corporate ID No. 81848	2. Name of Corpo A.F.M. Lin		••		
3. Street Address Principal Busine			City	State	Zip
1060 Park Ave	enue	5. State of Incorpora	Cranston	RI	02910 6. SIC Code
401–464–4800 7. Brief Description of the Charac	ter of Business Conducted	RHODE ISL d in Rhode Island	AND		5884
Retail Sales					
8. NAMES AND ADDRE	ESSES OF THE OF	FICERS ("X" BOX FOR A	TTACHMENT) FILL IN SPACE Vice President Name	ES BEFORE USING ATTA	CHMENTS
Dennis Nichol Street Address	ls		Street Address		
1060 Park Ave	enue				
cuy Cranston	Siate RL	zip 02910	Clty	State	Zip
Secretary Name			Treasurer Name		
Dennis Nichol Street Address			Street Address		-
1060 Park Ave	nue				
Clty	State	Zip	City	State	Zip
Cranston	RI	029 <u>10</u>			
9. NAMES AND ADDRE Director Name	ESSES OF THE DII	RECTORS ("x" BOX FOR	ATTACHMENT) FILL IN SPA Director Name	CES BEFORE USING ATT	ACHMENTS
Dennis Nichol	.S		Street Address		
1060 Park Ave	nue				
Clly	State	Zip	City	State	Zip
Cranston Director Name	RŢ	02910	Director Name		
Street Address			Street Address		
Cuy	State	Zip	City	State	Zip
10. SHARES AUTHORIZ	ED ("X" BOX FOR AT	TACHMENT)	11. SHARES ISSUED	(*X" BOX FOR ATTACHMEN	Г)
Number of Shares 8,000 COMM \$1.00 PAR	Glass/Series	Par Volue	Number of Shares	Class/Series	Par Value
-,	TALVL		100	Common	\$1.00

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

Title of Officer



File Date:	MAR_	1 4 2002
Check No.:	By	1037F
Ву:	d	82562
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 II statements contained herein are true and correct.

Signature of Officer Date

Dennis M. Nachols

Print or Type Name of Officer

President



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

State

RΙ

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001 Filing Perlod: January 1-March 1 • Filing Fee: \$50.00

City

Cranston

STOP
PLEASE READ
INSTRUCTIONS

02910

(FORM	MUST B	BE TYPE	D IN BLACK)

1. Carporate ID No.

2. Name of Corporation

81848

3. Street Address Principal Business Office

A.F.M. Limited

1060 Barda Barana	
1060 Park Avenue	5. State of Incorporation
(401) 464-4800	RHODE ISLAND
7. Brief Description of the Character of Business Conducted In	Rhode Island

"Vecail Saies	SEER OF THE OFFI	CERS (*X* BOX FOR ATI	THE INCOME.		
s. NAMES AND ADDRES resident Name	SES OF THE OFFI	LEKS ("X" BOX FOR AT	Vice President Name	BEFORE USING AT	ITACHMENTS
Dennis Nicho	ols		Street Address		
1060 Park Av	renue State	Zip	City	State	Ζίρ
Cranston ecretary Name	RI	02910	Treasurer Name		
Dennis Nicho	ols		Dennis Niche	ols	
1060 Park Av	enue State	Zip	1060 Park A	venue State	Zip
Cranston NAMES AND ADDRES	RI SES OF THE DIRE	02910 CTORS (*x* BOX FOR)	Cranston ATTACHMENT) FILLIN SPAC Director Name	RI ES BEFORE USING	02910 ATTACHMENTS
meetor Name					
Dennis Nicho	ols		Street Address		·
Dennis Nicho	•	Zip	Street Address : City	State	Z l p
Dennis Nicho	enue	zıp . 02910	:	State	Zip
Dennis Nicho 1060 Park Av Cranston	enue State	•	City	Stote	Zip
Dennis Nicho Acet Address 1060 Park Av Cranston Acet of Name	enue State	•	City Director Name	State State	Zip Zip
Dennis Nicho treet Address 1060 Park Av ity Cranston Prector Name	Penue State RI State	02910 Zip	City Director Name Street Address	State	Zip

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

Number of Shares

100



8,000 COMM \$1.00 PAR VALUE

Class/Series

Par Value

Number of Shares

Flie Date: 5-14-01

Check No.: 3243

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 ell statements contained herein are true and correct.

Class/Series

Common

Par Value

\$1.00

Ennie Signature of Officer	m	nuch	res	5-7-01
Signature of Officer	,		Date	

i	<u>Dennis Nichols</u>	_
•	Print or Type Name of Officer	

President ____

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 2000 Filing Period: January 1-March 1 • Filing Fee: \$50.00

401-277-3040

(FORM MUST BE TYPED IN B	LACK)				
1. Corporate ID No. 8 \ 8 \ 8 \ 8	2. Name of Corpora A.F.M.	Limited.	•		
3. Street Address Principal Busine	ess Office		City	State	Zip
1060 Park F	ivenue		Cranston	RI	02920
4. Business Phone No.		5. State of Incorporation	·		6, SIC Code
(401) 464-	4800	Khode I	SLAND		5884
7. Brief Description of the Charac	ter of Business Conducted i	n Rhode Island			
8. NAMES AND ADDRI	ESSES OF THE OFF	ICERS ("X" BOX FOR ATTAC	CHMENT)		
President Name			Vice President Name		
Dennis Nich	ols		H Street Address		
Street Address			Street Address	•	
_1060 Park A	venue				
City	State	Zip	Clty	State	Zip
Cranston	RI	02910			
Secretary Name			Treasurer Name	N12 - N - 1 -	
Dennis Nich	ols		Dennis	NICHOIS	
Street Address			Street Address	rk Aironia	
1060 Park Av		7).	• .	rk Avenue	7/0
City	State	Zip	Cranston	State RI	zι _ρ 02910
Cranston	RI	02910	Cranston	K1	02510
Director Name		ECTORS (*X* BOX FOR AT	TACHMENT) Director Name		
Dennis Nich	ols				
Street Address			Street Address		
1060 Park A				4	
City	State	Zip	City	State	Zip
Cranston Director Name	RI	. 02910	Director Name		
Street Address			Street Address		
City	State	Zip	City	State	ZIp
10. SHARES AUTHORIS	ZED ("X" BOX FOR ATT	FACHMENT)	11. SHARES ISSUED	("X" BOX FOR ATTACHMENT)	
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
8,000 SHS CO	MM \$1.00 PA	R	100	Common	\$1.00

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

	PAID	
File Date:	APR 2 5 2000 00. 114 68 11 0- 844	
Check No.:	SECT OF STATE TIVES TO SECTION OF STATE	
By:FOR SECRETARY OF	J_1	

Inder penalty of p	erjury, I declare and affirm	that I have examined
	ing any accompanying sche	
hat all statements	contained herein are true	and correct.
Denni	Michaels	4/19/00
ignature of Officer		Date

Dennis Nichols
Print or Type Name of Officer

President

Title of Officer

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 1999

Hing	Period:	January 1	l-March .	1 •	Filing	Fee: 1	50.00
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PLEASE E	READ
INSTRUCT	1022

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(FORM MUST BE TYPEE	IN BLACK)				
1. Corporate ID No.	2. Name of Corporation		_		
81848		A.F.M. Limi	ted		
3. Street Address Principal	Business Office		City	State	Zip
1060 Park	Avenue		Cranston	RI	02910
4. Business Phone No.		5. State of Incorporation			6. SIC Code
		RHODE	ISLAND		5884
7. Brief Description of the	Character of Business Conducted in	Rhode Island			
Retail Sal	les				
8. NAMES AND AI	DDRESSES OF THE OFFIC	ERS ("X" BOX FOR ATTAC	HMENT)		
President Name			Vice President Name		
A. Daniel	Geribo				
Street Address			Street Address		
1060 Park	Avenue				
City	State	Zip	City	State	Zip
Cranston	RI	02910			
Secretary Name	•		Treasurer Name	•	
A. Daniel	Geribo		A. Daniel Ger	ribo	
Street Address			Street Address		
1060 Park	Avenue		1060 Park Ave	enue	
City	State	Zip	City	State	Zip
Cranston	RI	02910	Cranston	RI	02910
9. NAMES AND A	DDRESSES OF THE DIRE	CTORS ("X" BOX FOR ATT	TACHMENT)		
Director Name			Director Name		
A. Daniel	Geribo		•		
Street Address			Street Address		,
1060 Park	Avenue				
City	State	Zip	City	State	Zip
Cranston	RI	02910			
Director Name		••••	Director Name	,	
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTH	ORIZED (*X* BOX FOR ATTA	CHMENT)	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
8,000 SHS	COMM \$1.00 PAR	1	100	Common	\$1.00
•					

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

	11 21 00	
File Date:	4-26-99	
Check No.: _	3168	
Ву:	AME	. —
	ARY 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 no true and correct.

Signature of Officer

Print or Type Name of Officer

Title of Officer



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

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1998

STOP

Filing Period: January 1-March 1 • Filing Fee: \$50.00 (FORM MUST BE TYPED IN BLACK) 1. Corporate ID No. 2. Name of Corporation 81848 A.F.M.Limited 3. Street Address Principal Business Office City State Zip 1060 Park Avenue Cranston RI 02910 6. SIC Code 4. Business Phone No. 5. State of Incorporation RHODE ISLAND 5884 7. Brief Description of the Character of Business Conducted in Rhode Island Retail Sales 8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) President Name Vice President Name Daniel Geribo Street Address Street Address 1060 Park Avenue City State Zip Cranston 02910 RT Secretary Name Treasurer Name A. Daniel Geribo A. Daniel Geribo Street Address Street Address 1060 Park Avenue 1060 Park Avenue City City State State Zip Cranston 02910 RI 02910 RI Cranston 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) Director Name Director Name A. Daniel Geribo Street Address Street Address 1060 Park Avenue City State City State Zip Cranston RI 02910 Director Name Director Name Street Address Street Address City State City ZIP 10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT) 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) AUTHORIZED SHARES ISSUED SHARES Class/Series Par Value Number of Shares Class/Series Par Value Number of Shares

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

100

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lle Date:	2/18/98
heck No.:	安8047
ly:	
OR SECRETAR	Y OF STATE USE ONLY

8,000 SHS COMM \$1.00 PAR

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

Print or Type Name of Officer

Title of Officer

Common

\$1.00



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

PROFIT CORPORATION ANNUAL REPORT 1997

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.

2. Name of Corporation

81848

A.F.M. Limited

3. Street Address Principal Business Office

1060 Park Avenue

State RΙ Zip 02910

4. Business Phone No.

5. State of Incorporation

6. SIC Code 5884

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

Retail Sales

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

President Name

Vice President Name

Cranston

A. Daniel Geribo

Street Address

1060 Park Avenue

1060 Park Avenue

State RΙ 02910

City

Street Address

City

State

Zip

Cranston Secretary Name

Street Address

A. Daniel Geribo

Treasurer Name A. Daniel Geribo

Street Address

1060 Park Avenue

Cranston

State RI

02910

Cranston

State RI

02910

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

Director Name

Director Name

A. Daniel Geribo

Street Address

1060 Park Avenue

Street Address

State

City

State

Director Name

Cranston

RI

02910

Director Name

Street Address

Street Address

City

State

City

Zip

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

AUTHORIZED SHARES Number of Shares

Class/Series

Par Value

ISSUED SHARES

Number of Shares

Class/Series

Par Value

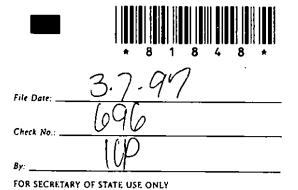
8,000 SHS COMM \$1.00 PAR

100

Common

\$1.00

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 lighein are true and correct. Signature of Officer

A. Daniel Geribo Print or Type Name of Officer

President Title of Officer

PROFIT CORPORATON ANNUAL REPORT

Corrected



State of Rhode Island and Providence Plantations James R. Langevin, Secretary of State

Corporations Division 100 North Main Street Providence, Rhode Island 02903-1335 • (401) 277-3040

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

PLEASE TYPE OR PRINT IN BLACK INK.

1 CORPORATE ID NO

2. NAME OF CORPORATION

81848

A. F. M. Limited

3 STREET ADDRESS PRINCIPAL BUSINESS OFFICE

CITY

STATE

ZIP CODE

788 Reservoir Ave.

Suite 300

Cranston

RI

02910

4 BUSINESS PHONE NO

5 STATE OF INCORPORATION

6 S-C CODE

(401) 941-4100

RT

7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE-SLAND

Retail Sales of Videos, Magazines and Men's apparel

8. NAMES AND ADDRESSES DFFICERS θF THE

PRESIDENT NAME

VICE PRESIDENT NAME

Dennis M, Nichols

STREET ADDRESS

STREET ADDRESS

23 Verdic Ave

STATE

ZIP CODE

CITY

STATE

Z P CODE

Providence

RI

02909-5911

TREASURER NAME

as President Same

Same as President.

STREET ADDRESS

STREET ADDRESS

SECRETARY NAME

STATE

ZIP CODE

STATE

ZIP CODE

A H D DORESSES DIRECTORS

DIRECTOR NAME

DIRECTOR NAME

STREET ADDRESS

STREET ADDRESS

C.TY

STATE

Z-P CODE

CITY

STATE

ZIP CODE

DIRECTOR NAME

DIRECTOR NAME

STREET ADDRESS

STREET ADDRESS

CITY

STATE

ZIP CODE

CITY

STATE

ZIP CODE

SHARES AUTHORIZED AND

AUTHORIZED SHARES CLASS / SERIES

PAR VALUE

NUMBER OF SHARES

ISSUED SHARES CLASS / SERIES

PAR VALUE

8,000 \$HS Comm

NUMBER OF SHARES

\$1.00 PAR:

100 SHS

COMMON

\$1.00 PAR

This report must be SIGNED IN INK by either the

President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



File Date:

4/30/96 no fice

Check No:

By:

For Secretary of State Use Only

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer

. Dennis M. Nichols Print or Type Name of Officer

President Title of Officer

Date

FORM 31 12/95

PROFIT CORPORATION ANNUAL REPORT

1996



State of Rhode Island and Providence Plantations James R. Langevin, Secretary of State
Corporations Division
100 North Main Street

Providence, Rhode Island 02903-1335 + (401) 277-3040

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

CORPORATE ID NO	2. NAME OF CORPORATE		PRINT IN BLACK INK.			
81848		M. Limited				
STREET ADORESS PRINCIPAL BUSINESS O			CITY	STATE	ZIP CODE	
788 Reservoir Ave. Suite		te 300	Cranston	RI	02910	
BUSINESS PHONE NO.		5. STATE OF INCORPORATION			6. SC 000E	
(401) 941-41		RHODE I	SLAND		5884	
Potail colo			3		- ··· · · · · · · · · · · · · · · · · ·	
Recall Sales			d men's apparel			
espent wwe A. Daniel Ge		AMES AND ADDR	ESSES OF THE O	FFICERS		
RETADORESS 12 Tanya Dri	ve		STREET ADDRESS			
Mansfield	STATE	7200E 02048	΄ατν	STATE	ZIP COOE	
A. Daniel Ge	ribo		A. Daniel (Geribo	<u></u>	
(same as abo	ve)		'street Address ' (same as above)			
Y	STATE	ZIP COOE	Ölly	STATE	ℤ Р C00€	
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ECTOR NAME			OTRECTOR NAME			
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	1 0 . Authorized Shares	SHARES AUTHOR	IZED AND ISSUE	O ISSUED SHARES		
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			ł .		 	
Pre:	T sident, Vice Pres	his report must be SI (sident, Secretary, Assis	GNED IN INK by either to stant Secretary, Treasure	the er. Receiver or Trusto	ee 1	
	, 	- ,	Under penalty	of periury. I declare and	I affirm that I have examine hedules and statements, and statements, and statements are larged to the statements.	
1 1			all statements	contained herely are true	evane correct	

File Date:

By:

A. Daniel Geribo

Print or Type Name of Officer

President

Title of Officer

State of Rhode Island and Providence Plantations Office of The Secretary of State

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Providence, Rhode Island 02903-1335 401-277-3040

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Corporate ID:				Annual Report for the year:			
Name of Corporation	Airborne						
Business entity organize For foreign entity, addre	d under the laws of the State of: ss and telephone number of prin	icipal office:		Business Entity is (check one): [X] Business Corporation (See RIGL Chapter 7-1.1) [] Professional Service Corporation (See RIGL Chapter 7-5.1)			
Island (Provide street add 1060_Park_Ave		s entity in Rhode		engage in debution, reta	the character of business conducted eveloping, manufacturally and wholesale of every kind and descriptions.	ring, distri- goods and	
Phone: ()							
		THE NAMES	OF THE	OFFICERS ARI	7.		
Carl A. Bruno VICE PRESIDENT)	s <u>1060 Park</u>	TREET ADDRES	\$	Cranston, RI	ZIP CODE 02910 ZIP CODE	
Anthony P. Sa	ntucci	1060 Park	IREET ADDRES AVENUE TREET ADDRES		CITYSTATE Cranston, RI	71P CODE. 02910	
Anthony P. Sa		1060 Park		DIRECTORS AR	Cranston, RI	217 CODE 02910	
Carl A. Bruno		s: 1060 Park	TREET ADDRES:		CITY/STATE Cranston, RI CITY/STATE	7/P CODE 02910 7/P CODE	
AME			IREET ADDRESS	3	CITY/STATE	ZIP CODE.	
UMBER OF SHARES A	UTHORIZED (Rider may be atta		N	UMBER OF SHARES	S ISSUED AND OUTSTANDING (R	ider may be attached)	
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Date FECEVA	fy 13, 1995		y: 3	nt P. San	uhn		
orm 31 195			TLE OF OFFICER	AMEDE DEFICER SIGNING	ANTUCCI TREASURER		
LEASE MOTE: 10 to	DESIGNATED	REGISTERE	D AGENT	FOR SERVICE	OF PROCESS:		
SEMOD NOTE. II (DE D	egistered office and/or register	ed agent indicate	d below is ir	icorrect, Form 9 mu:	st be filed.		

FRANCIS D. PARISI 170 WESTMINSTER STREET, SUITE 1000 PROVIDENCE RI 02903

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