



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 02903-13
401.222.36

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. 61248		2. Name of Corporation Medeiros Paint and Wallpaper Company Inc.			
3. Street Address Principal Business Office 27 Furey Avenue			City Tiverton	State RI	Zip 02878
4. Business Phone No. (401) 625-1449		5. State of Incorporation RHODE ISLAND			6. SIC Code 257
7. Brief Description of the Character of Business Conducted in Rhode Island PAINTING CONTRACTOR					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Gary A. Medeiros			Vice President Name		
Street Address 27 Furey Avenue			Street Address		
City Tiverton	State RI	Zip 02878	City	State	Zip
Secretary Name Elizabeth A. Medeiros			Treasurer Name		
Street Address 27 Furey Avenue			Street Address		
City Tiverton	State RI	Zip 02878	City	State	Zip
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> 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) <input type="checkbox"/>					
AUTHORIZED SHARES					
Number of Shares	Class/Series	Par Value	No Par		
1,000					
1,000 NO PAR VALUE					
11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
ISSUED SHARES					
Number of Shares	Class/Series	Par Value			
0					

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.	FEB 08 2005
By:	<i>[Signature]</i>
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] 1/29/05
Signature of Officer Date

Gary A. Medeiros
Print or Type Name of Officer

President
Title of Officer



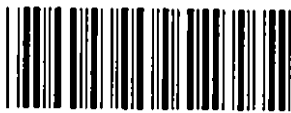
PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

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

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 61248		2. Name of Corporation Medeiros Paint and Wallpaper Company Inc.			
3. Street Address Principal Business Office 27 FUREY AVE.			City TIVERTON	State R.I.	Zip 02878
4. Business Phone No. 401-625-1449		5. State of Incorporation RHODE ISLAND		6. SIC Code 257	
7. Brief Description of the Character of Business Conducted in Rhode Island PAINTING CONTRACTOR					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name GARY A medeiros			Vice President Name		
Street Address 27 Furey Ave.			Street Address		
City TIVERTON	State RI	Zip 02878	City	State	Zip
Secretary Name ELIZABETH medeiros			Treasurer Name		
Street Address 27 Furey Ave.			Street Address		
City TIVERTON	State RI	Zip 02878	City	State	Zip
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> 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) <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
1000		NO PAR	0		
1,000 NO PAR VALUE					

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



* 6 1 2 4 8 *

File Date 1-23-04
Check No. 3808
By: 9
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.

GARY A. medeiros 1-21-04
Signature of Officer Date
GARY A. medeiros
Print or Type Name of Officer
PRES.
Title of Officer

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. **61248** 2. Name of Corporation **Medeiros Paint and Wallpaper Company Inc.**
3. Street Address Principal Business Office **27 Furey Avenue** City **Tiverton** State **RI** Zip **02878**
4. Business Phone No. **(401) 625-1449** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **257**

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

Painting Contractor

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

President Name **Gary A. Medeiros** Vice President Name
Street Address **27 Furey Avenue** Street Address
City **Tiverton** State **RI** Zip **02878** City State Zip

Secretary Name **Elizabeth A. Medeiros** Treasurer Name
Street Address **27 Furey Avenue** Street Address
City **Tiverton** State **RI** Zip **02878** City State Zip

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
Director Name Street Address City State Zip

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

AUTHORIZED SHARES
Number of Shares **1000** Class/Series Par Value **No Par**
1,000 NO PAR VALUE

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

ISSUED SHARES
Number of Shares **0** Class/Series Par Value

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



File Date: 1.02.03
Check No.: 3640
By: UP

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.

Gary A. Medeiros 1/14/03
Signature of Officer Date
Gary A. Medeiros
Print or Type Name of Officer
President

Title of Officer
5



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. **61248** 2. Name of Corporation **Medeiros Paint and Wallpaper Company Inc.**
3. Street Address Principal Business Office **27 Furey Avenue** City **Tiverton** State **RI** Zip **02878**
4. Business Phone No. **401) 625-1449** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **257**

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

Painting Contractor

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

President Name Gary A. Medeiros Street Address 27 Furey Avenue City Tiverton State RI Zip 02878	Vice President Name Street Address City State Zip
Secretary Name Elizabeth A. Medeiros Street Address 27 Furey Avenue City Tiverton State RI Zip 02878	Treasurer Name Street Address City State Zip

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
Director Name Street Address City State Zip	Director Name Street Address City State Zip

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

AUTHORIZED SHARES	Class/Series	Par Value
1,000 NO PAR VALUE		

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

ISSUED SHARES	Class/Series	Par Value
-0-		

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



* 6 1 2 4 8 *

File Date: 1/30/02
Check No.: 2455
By: GME

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.

Gary Medeiros 1-23-02
Signature of Officer Date

Gary A. Medeiros 1-23-02
Print or Type Name of Officer

President
Title of Officer

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. **61248** 2. Name of Corporation **Medeiros Paint and Wallpaper Company Inc.**
3. Street Address Principal Business Office **27 Furey Avenue** City **Tiverton** State **RI** Zip **02878**
4. Business Phone No. **(401) 625-1449** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **257**
7. Brief Description of the Character of Business Conducted in Rhode Island
Painting Contractor

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

President Name Gary A. Medeiros Street Address 27 Furey Avenue City Tiverton State RI Zip 02878	Vice President Name Street Address City State Zip
Secretary Name Elizabeth A. Medeiros Street Address 27 Furey Avenue City Tiverton State RI Zip 02878	Treasurer Name Street Address City State Zip

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
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 **1000** Class/Series Par Value **no par**
1,000 NO PAR VALUE

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

ISSUED SHARES
Number of Shares **0** Class/Series Par Value

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



* 6 1 2 4 8 *

File Date: 2/22
Check No.: 3273
By: C
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: Gary A. Medeiros Date: 1/29/01
Print or Type Name of Officer: Gary A. Medeiros
Title of Officer: President



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. 61248
 2. Name of Corporation Medeiros Paint and Wallpaper Company Inc.
 3. Street Address Principal Business Office 27 Furey Avenue
 City Tiverton State RI Zip 02878
 4. Business Phone No. (401) 625-1449
 5. State of Incorporation Rhode Island
 6. SIC Code 802878
 7. Brief Description of the Character of Business Conducted in Rhode Island
 Painting Contractor

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

President Name Gary A. Medeiros Street Address 27 Furey Avenue City Tiverton State RI Zip 02878	Vice President Name Gary A. Medeiros Street Address 27 Furey Avenue City Tiverton State RI Zip 02878
Secretary Name Elizabeth A. Medeiros Street Address 27 Furey Avenue City Tiverton State RI Zip 02878	Treasurer Name Gary A. Medeiros Street Address 27 Furey Avenue City Tiverton State RI Zip 02878

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 (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES		
Number of Shares	Class/Series	Par Value
1000		no par

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

ISSUED SHARES		
Number of Shares	Class/Series	Par Value
0		

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: PAID MAY 08 2000 KID 242600
 Check No.: _____
 By: SEC'Y OF STATE
 FOR SECRETARY OF STATE USE ONLY

Signature of Officer: Gary A. Medeiros Date: 2/23/00
 Print or Type Name of Officer: Gary A. Medeiros
 Title of Officer: President

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. 61248 2. Name of Corporation Medeiros Paint and Wallpaper Company Inc.
3. Street Address Principal Business Office 27 Furey Avenue Tiverton RI 02878
4. Business Phone No. 625-1449 5. State of Incorporation Rhode Island 6. SIC Code

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

Painting Contractor

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

President Name Gary A. Medeiros Vice President Name
Street Address 27 Furey Avenue Tiverton RI 02878
City State Zip City State Zip

Secretary Name Elizabeth A. Medeiros Treasurer Name
Street Address 27 Furey Avenue Tiverton RI 02878
City State Zip City State Zip

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

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

AUTHORIZED SHARES
Number of Shares 1000 Class/Series Par Value no par

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

ISSUED SHARES
Number of Shares Class/Series Par Value

RECEIVED
FEB 23 10 54 AM '99

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

PAID

Handwritten initials and date

File Date: MAY 08 2000

Check No.: SECY OF STATE

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 Gary A. Medeiros Date 3-17-99

Print or Type Name of Officer Gary A. Medeiros

Title of Officer President

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. 61248 2. Name of Corporation MEDEIROS PAINT AND WALLPAPER CO., INC.
 3. Street Address Principal Business Office 27 FUREY AVE. City TIVERTON State RI Zip 02878
 4. Business Phone No. 401-625-1449 5. State of Incorporation R.I. 6. SIC Code 0257
 7. Brief Description of the Character of Business Conducted in Rhode Island PAINTING + WALLPAPERING

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

President Name <u>GARY MEDEIROS</u>	Vice President Name <u>GARY MEDEIROS</u>
Street Address <u>27 FUREY AVE.</u>	Street Address <u>27 FUREY AVE.</u>
City State Zip <u>TIVERTON RI 02878</u>	City State Zip <u>TIVERTON RI 02878</u>
Secretary Name <u>ELIZABETH MEDEIROS</u>	Treasurer Name <u>GARY MEDEIROS</u>
Street Address <u>27 FUREY AVE.</u>	Street Address <u>27 FUREY AVE.</u>
City State Zip <u>TIVERTON RI 02878</u>	City State Zip <u>TIVERTON RI 02878</u>

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

Director Name <u>GARY MEDEIROS</u>	Director Name <u>SAME</u>
Street Address <u>27 FUREY AVE.</u>	Street Address <u>SAME</u>
City State Zip <u>TIVERTON RI 02878</u>	City State Zip <u>SAME</u>
Director Name <u>SAME</u>	Director Name <u>SAME</u>
Street Address <u>SAME</u>	Street Address <u>SAME</u>
City State Zip <u>SAME</u>	City State Zip <u>SAME</u>

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

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value
<u>1,000</u>	<u>NO PAR</u>	<u>VALUE</u>
<u>0</u>	<u>N/A</u>	<u>N/A</u>

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

ISSUED SHARES

Number of Shares	Class/Series	Par Value
<u>NONE</u>	<u>N/A</u>	<u>N/A</u>
<u>N/A</u>	<u>N/A</u>	<u>N/A</u>
<u>N/A</u>	<u>N/A</u>	<u>N/A</u>

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

File Date: 5-5-98
 Check No.: 2442
 By: AMF

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.

Gary Medeiros 3-19-98
 Signature of Officer Date
GARY MEDEIROS
 Print or Type Name of Officer
PRESIDENT
 Title of Officer

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. **61248** 2. Name of Corporation **Medeiros Paint and Wallpaper Company Inc.**
3. Street Address Principal Business Office **52 HOMER STREET** City **NEWPORT** State **R. I.** Zip **02840**
4. Business Phone No. **401-846-2880** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **0267**

7. Brief Description of the Character of Business Conducted in Rhode Island
PAINTING, WALLPAPERING, PLASTERING + POWER WASHING

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

President Name GARY MEDEIROS Street Address 52 HOMER ST. City NEWPORT State RI. Zip 02840	Vice President Name GARY MEDEIROS Street Address 52 HOMER ST. City NEWPORT State RI Zip 02840
Secretary Name ELIZABETH MEDEIROS Street Address 52 HOMER ST. City NEWPORT State R.I. Zip 02840	Treasurer Name GARY MEDEIROS Street Address 52 HOMER ST. City NEWPORT State R.I. Zip 02840

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

Director Name NONE Street Address City State Zip	Director Name NONE 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			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1,000 SHS NO PAR VAL			none	none	none
none					

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



File Date: 1/16/97
Check No.: 2062
By: [Signature]

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: 1/14/97
Print or Type Name of Officer: GARY MEDEIROS
Title of Officer: PRES.

FOR SECRETARY OF STATE USE ONLY

ANNUAL REPORT

1990



James R. Langevin, Secretary of State
Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335 • (401) 277-3

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

PLEASE TYPE OR PRINT IN BLACK INK.

1. CORPORATE ID NO. 61248		2. NAME OF CORPORATION Medeiros Paint and Wallpaper Company Inc.			
3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE 52 HOMER ST.		CITY NEWPORT	STATE R.I.	ZIP CODE 02840	
4. BUSINESS PHONE NO. 401-846-2880		5. STATE OF INCORPORATION RHODE ISLAND		6. SIC CODE 0257	

7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND
Interior + exterior painting, pressure washing + paper hanging

8. NAMES AND ADDRESSES OF THE OFFICERS					
PRESIDENT NAME GARY MEDEIROS			VICE PRESIDENT NAME GARY MEDEIROS		
STREET ADDRESS 52 HOMER ST.			STREET ADDRESS 52 HOMER ST.		
CITY NEWPORT	STATE R.I.	ZIP CODE 02840	CITY NEWPORT	STATE R.I.	ZIP CODE 02840
SECRETARY NAME ELIZABETH MEDEIROS			TREASURER NAME GARY MEDEIROS		
STREET ADDRESS 52 HOMER ST.			STREET ADDRESS 52 HOMER ST.		
CITY NEWPORT	STATE R.I.	ZIP CODE 02840	CITY NEWPORT	STATE R.I.	ZIP CODE 02840

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					
AUTHORIZED SHARES			ISSUED SHARES		
NUMBER OF SHARES	CLASS / SERIES	PAR VALUE	NUMBER OF SHARES	CLASS / SERIES	PAR VALUE
1,000 SHS	NO PAR VAL		none		

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: 4/4/96
Check No: 1905
By: [Signature]
For Secretary of State Use Only

[Signature]
Signature of Officer
GARY MEDEIROS
Print or Type Name of Officer
President
Title of Officer
2-26-96
Date

DETACH BOTTOM BEFORE RETURNING



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
Filing Fee \$50.

Make Checks Payable to: Secretary of State

ALL ENTRIES MUST BE COMPLETED IN FULL OR THE FORM WILL BE RETURNED.

Corporate ID: 0061248 Annual Report for the year: 1995

Name of Corporation: medeiros PAINT + WALLPAPER CO. INC.

Business entity organized under the laws of the State of: R. I.

For foreign entity, address and telephone number of principal office:

N/A

Business Entity is (check one):

Business Corporation (See RIGL Chapter 7-1.1)

Professional Service Corporation (See RIGL Chapter 7-5.1)

Phone: ()

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

52 HOMER ST.
NEWPORT, R.I. 02840

Phone: (401) 846-2880

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

~~GARY MEDEIROS PRES.~~

~~52 HOMER ST.~~

~~NEWPORT, R.I. 02840~~

PAINT + WALLPAPER

RESIDENTIAL + COMMERCIAL

THE NAMES OF THE OFFICERS ARE:

OFFICER	STREET ADDRESS	CITY/STATE	ZIP CODE
PRESIDENT <u>GARY MEDEIROS</u>	<u>52 HOMER</u>	<u>NEWPORT RI</u>	<u>0284</u>
VICE PRESIDENT <u>GARY MEDEIROS</u>	<u>52 HOMER</u>	<u>NEWPORT RI</u>	<u>0284</u>
SECRETARY <u>ELIZABETH MEDEIROS</u>	<u>52 HOMER ST</u>	<u>NEWPORT R.I.</u>	<u>0284</u>
TREASURER <u>GARY MEDEIROS</u>	<u>52 HOMER</u>	<u>NEWPORT RI</u>	<u>0284</u>

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
<u>N/A</u>			
<u>N/A</u>			
<u>N/A</u>			

NUMBER OF SHARES AUTHORIZED (Rider may be attached)		NUMBER OF SHARES ISSUED AND OUTSTANDING (Rider may be attached)	
Number of Shares	Class / Series	Number of Shares	Class / Series
<u>1 000</u>	<u>SHARES</u>	<u>1 000</u>	<u>SHARES</u>
<u>NO PAR VALUE</u>		<u>NO PAR VALUE</u>	

Date Feb 8, 19 94

By: Gary Medeiros
GARY MEDEIROS

PRINT OR TYPE NAME OF OFFICER SIGNING

TITLE OF OFFICER SIGNING PRES

Form 31 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.

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.
CORP: Jan. 1 - Mar

Corporate ID: 0061248 Annual Report for the year: 1994

Name of Business Entity: Medeiros Paint + Wallpaper Co. Inc.

Business entity organized under the laws of the State of: R.I.

Federal Taxpayer Identification Number: [REDACTED]

For foreign entity, address and telephone number of principal office:
N/A

Phone: ()

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

52 HOMER ST.
NEWPORT, RI 02840

Phone: (401) 846-2880

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:

GARY MEDEIROS President
NEWPORT, RI 02840

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

PERFORM PAINTING + WALLPAPERING -
RESIDENTIAL + COMMERCIAL

Date of Organization:

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

N/A

THE NAMES OF THE OFFICERS ARE:

	STREET ADDRESS	CITY/STATE	ZIP CODE
<input checked="" type="checkbox"/> CHIEF EXECUTIVE OFFICER OR <input checked="" type="checkbox"/> PRESIDENT (Check One)	<u>GARY MEDEIROS 52 HOMER ST.</u>	<u>NEWPORT, RI</u>	<u>0284</u>
<input type="checkbox"/> CHIEF OPERATING OFFICER OR <input checked="" type="checkbox"/> VICE PRESIDENT (Check One)	<u>GARY MEDEIROS 52 HOMER ST.</u>	<u>NEWPORT, RI</u>	<u>0284</u>
<input type="checkbox"/> CUSTODIAN OF RECORDS OR <input checked="" type="checkbox"/> SECRETARY (Check One)	<u>ELIZABETH MEDEIROS 52 HOMER ST.</u>	<u>NEWPORT, RI</u>	<u>0284</u>
<input type="checkbox"/> CHIEF FINANCIAL OFFICER OR <input checked="" type="checkbox"/> TREASURER (Check One)	<u>GARY MEDEIROS 52 HOMER ST.</u>	<u>NEWPORT, RI</u>	<u>0284</u>

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
<u>N/A</u>			

NUMBER OF SHARES AUTHORIZED (If Applicable)

NUMBER N/A 1,000 SHARES
CLASS NO PAR VALUE

SERIES

PAR VALUE OR WITHOUT PAR

NUMBER OF SHARES ISSUED AND OUTSTANDING (If Applicable)

NUMBER N/A 1,000 SHARES
CLASS NO PAR VALUE

SERIES

PAR VALUE OR WITHOUT PAR

FILED

FEB 10 1995

By 100#301079

Date JAN 4 19 95

By: GARY MEDEIROS

GARY MEDEIROS

PRINT OR TYPE NAME OF OFFICER SIGNING

President

TITLE OF OFFICER SIGNING

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

PLP 1/12/93

Corporate ID 0051248 Annual Report for the year 1993

FIRST: The name of the corporation is Medeiros Paint and Wallpaper Company

SECOND: It is incorporated under the laws of RHODE ISLAND

THIRD: Character of business, briefly stated, is PAINTING, WALL PAPER, & CARPENTRY

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island

52 HOMER STREET NEWPORT, RHODE ISLAND 02840

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

Name	Office	Address (including number, street, zip code)
GARY A. MEDEIROS	Director	52 HOMER STREET NEWPORT, RHODE ISLAND 02840
ELIZABETH A. MEDEIROS	Director	52 HOMER STREET NEWPORT, RHODE ISLAND 02840
	Director	
GARY A. MEDEIROS	President	SAME AS ABOVE
ELIZABETH A. MEDEIROS	Vice President	SAME AS ABOVE
ELIZABETH A. MEDEIROS	Secretary	SAME AS ABOVE
GARY A. MEDEIROS	Treasurer	SAME AS ABOVE

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
1000	COMMON		NO PAR VALUE

PAID

MAR 01 1993

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
NONE			

SECRETARY OF STATE

Dated FEBRUARY 2, 19 93

MEDEIROS PAINT & WALL PAPER CO., INC.
(Name of Corporation)

By Gary Medeiros

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 02903

102477

Corporate ID 0061249 Annual Report for the year 1992

FIRST: The name of the corporation is Medeiros Paint and Wallpaper Company

SECOND: It is incorporated under the laws of RHODE ISLAND

THIRD: Character of business, briefly stated, is PAINTING, WALL PAPER, & CARPENTRY

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island
52 HOMER STREET NEWPORT, RHODE ISLAND 02840

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

Name	Office	Address (including number, street, zip code)
GARY A. MEDEIROS	Director	52 HOMER STREET NEWPORT, RHODE ISLAND 02840
ELIZABETH A. MEDEIROS	Director	52 HOMER STREET NEWPORT, RHODE ISLAND 02840
	Director	
GARY A. MEDEIROS	President	SAME AS ABOVE
ELIZABETH A. MEDEIROS	Vice President	SAME AS ABOVE
ELIZABETH A. MEDEIROS	Secretary	SAME AS ABOVE
GARY A. MEDEIROS	Treasurer	SAME AS ABOVE

SEVENTH: Number of Shares authorized:

No. of Shares	Class
1000	COMMON

Par Value or statement that shares are without par value
NO PAR VALUE

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series
NONE		

Par Value or statement that shares are without par value

Dated JANUARY 27 19 92

MEDEIROS PAINT & WALL PAPER CO. INC.
(Name of Corporation)

By Gary Medeiros

Title PRESIDENT

(Report must be signed by an officer)

PAID
Series
FEB 20 1992
SECY OF STATE

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 0051248 Annual Report for the year 1991

FIRST: The name of the corporation is Medeiros Paint and Wallpaper Company

SECOND: It is incorporated under the laws of RHODE ISLAND

THIRD: Character of business, briefly stated, is Painting, Wallpapering and carpentry

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

FIFTH: Business address in Rhode Island 52 Homer Street Newport, Rhode Island 02840

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

Name	Office	Address (including number, street, zip code)
Gary A, Medeiros	Director	52 Homer St Newport, R.I. 02840
Elizabeth A. Medeiros	Director	52 Homer St Newport, R.I. 02840
	Director	
Gary A. Medeiros	President	52 Homer St Newport, R.I. 02840
Elizabeth A. Medeiros	Vice President	52 Homer St Newport, R.I. 02840
Elizabeth A. Medeiros	Secretary	52 Homer St Newport, R.I. 02840
Gary A. Medeiros	Treasurer	52 Homer St Newport, R.I. 02840

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
1000	Common		no par value

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
none			

PAID
Series 124 08 1991
ECY OF STATE

Dated January 30 19 91

Medeiros Paint & Wallpaper Co. Inc.
(Name of Corporation)

By Gary Medeiros
President

Title.....

(Report must be signed by an officer)