



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)

Form with sections 1-11: Corporate ID No. 81349, Name of Corporation Erin Fisheries, Inc., Street Address 13 Sea Lea Drive, City Narragansett, State RI, Zip 02882, Business Phone No. 401-782-6992, State of Incorporation RHODE ISLAND, SIC Code 2246, Brief Description TO CONDUCT COMMERCIAL FISHING OPERATIONS, Names and Addresses of Officers (President, Vice President, Secretary, Treasurer), Names and Addresses of Directors, Shares Authorized (600 COMM NO PAR VALUE), Shares Issued (100 Common No Par).

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



File Date 1-13-05, Check No. 4124, 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 1/8/05, Print or Type Name of Officer PATRICK MCGLADE, 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)

Form with sections 1-11: Corporate ID No. 81349, Name of Corporation Erin Fisheries, Inc., Street Address 13 Sea Lea Drive, City Narragansett, State RI, Zip 02882, Business Phone No. 401-782-6942, State of Incorporation RHODE ISLAND, SIC Code 2246, Brief Description TO CONDUCT COMMERCIAL FISHING OPERATIONS, Names and Addresses of Officers (Patrick McGlade), Names and Addresses of Directors (Patrick McGlade).

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



* 8 1 3 4 9 *

File Date 1-12-04, Check No. 3702, 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 Patrick McGlade, Date 1-7-04, Print or Type Name of Officer Patrick McGlade, Title of Officer President



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. 81349 2. Name of Corporation Erin Fisheries, Inc.
3. Street Address Principal Business Office 13 Sea Lea Drive City Narragansett State RI Zip 02882
4. Business Phone No. 401-782-6992 5. State of Incorporation RHODE ISLAND 6. SIC Code 2246
7. Brief Description of the Character of Business Conducted in Rhode Island Commercial Fishing

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

President Name <u>Patrick McGlade</u> Street Address <u>13 Sea Lea Drive</u> City <u>Narragansett</u> State <u>RI</u> Zip <u>02882</u>	Vice President Name <u>Patrick McGlade</u> Street Address <u>13 Sea Lea Drive</u> City <u>Narragansett</u> State <u>RI</u> Zip <u>02882</u>
Secretary Name <u>Patrick McGlade</u> Street Address <u>13 Sea Lea Drive</u> City <u>Narragansett</u> State <u>RI</u> Zip <u>02882</u>	Treasurer Name <u>Patrick McGlade</u> Street Address <u>13 Sea Lea Drive</u> City <u>Narragansett</u> State <u>RI</u> Zip <u>02882</u>

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

Director Name <u>Patrick McGlade</u> Street Address <u>13 Sea Lea Drive</u> City <u>Narragansett</u> State <u>RI</u> Zip <u>02882</u>	Director Name <u>n/a</u> Street Address <u>n/a</u> City _____ State _____ Zip _____
Director Name <u>n/a</u> Street Address <u>n/a</u> City _____ State _____ Zip _____	Director Name <u>n/a</u> Street Address <u>n/a</u> City _____ State _____ Zip _____

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

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

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

ISSUED SHARES	Number of Shares	Class/Series	Par Value
	100	Common	NO PAR

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



* 8 1 3 4 9 *

File Date: 4.14.03
Check No.: 3270
By: lup

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.

Patrick McGlade ✓ 3/1/03
Signature of Officer Date
Print or Type Name of Officer
Patrick McGlade
Title of Officer
President



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. **81349** 2. Name of Corporation **Erin Fisheries, Inc.**
3. Street Address Principal Business Office **13 Sea Lea Drive** City **Narragansett** State **RI** Zip **02882**
4. Business Phone No. **401-782-6992** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **2246**

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

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

President Name Patrick McGlade	Vice President Name Patrick McGlade
Street Address 13 Sea Lea Drive	Street Address 13 Sea Lea Drive
City Narragansett State RI Zip 02882	City Narragansett State RI Zip 02882
Secretary Name Patrick McGlade	Treasurer Name Patrick McGlade
Street Address 13 Sea Lea Drive	Street Address 13 Sea Lea Drive
City Narragansett State RI Zip 02882	City Narragansett State RI Zip 02882

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

Director Name Patrick McGlade	Director Name n/a
Street Address 13 Sea Lea Drive	Street Address n/a
City Narragansett State RI Zip 02882	City State Zip
Director Name n/a	Director Name n/a
Street Address n/a	Street Address n/a
City State Zip 	City State Zip

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

AUTHORIZED SHARES	Class/Series	Par Value
600 COMM NO PAR VALUE		

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

ISSUED SHARES	Class/Series	Par Value
100	Common	0 No Par

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



* 8 1 3 4 9 *

File Date: 1/28/02
Check No.: 2705
By: MS

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: Patrick McGlade Date: 1/24/02
Print or Type Name of Officer: Patrick McGlade
Title of Officer: President



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. **81349** 2. Name of Corporation **Erin Fisheries, Inc.**

3. Street Address Principal Business Office
13 Sea Lea Drive City **Narragansett** State **RI** Zip **02882**

4. Business Phone No. **401-782-6992** 5. State of Incorporation **RHODE ISLAND** 6. **2208**

7. Brief Description of the Character of Business Conducted in Rhode Island
Commercial Fishing and other lawful business

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

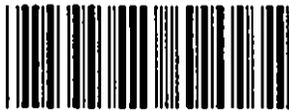
President Name Patrick McGlade Street Address 13 Sea Lea Drive City Narragansett State RI Zip 02882	Vice President Name Patrick McGlade Street Address 13 Sea Lea Drive City Narragansett State RI Zip 02882
Secretary Name Patrick McGlade Street Address 13 Sea Lea Drive City Narragansett State RI Zip 02882	Treasurer Name Patrick McGlade Street Address 13 Sea Lea Drive City Narragansett State RI Zip 02882

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

Director Name Patrick McGlade Street Address 13 Sea Lea Drive City Narragansett State RI Zip 02882	Director Name n/a Street Address City State Zip
Director Name n/a Street Address City State Zip 	Director Name n/a Street Address 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
600	COMM NO PAR VALUE		100	Common	0

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



* 8 1 3 4 9 *

File Date: 2/23
Check No.: 2286
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: 2/15/01
Print or Type Name of Officer: Patrick McGlade
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. **81349** 2. Name of Corporation **EMT Fisheries, Inc.**

3. Street Address Principal Business Office
13 Sea Lea Drive City **Narragansett** State **RI** Zip **02882**
4. Business Phone No. **401-782-6992** 5. State of Incorporation **RHODE ISLAND** 6. ~~2248~~

7. Brief Description of the Character of Business Conducted in Rhode Island
Commercial fishing and other lawful business

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

President Name Patrick McGlade Street Address 13 Sea Lea Drive City State Zip Narragansett RI 02882	Vice President Name Patrick McGlade Street Address 13 Sea Lea Drive City State Zip Narragansett RI 02882
Secretary Name Patrick McGlade Street Address 13 Sea Lea Drive City State Zip Narragansett RI 02882	Treasurer Name Patrick McGlade Street Address 13 Sea Lea Drive City State Zip Narragansett RI 02882

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

Director Name Patrick McGlade Street Address 13 Sea Lea Drive City State Zip Narragansett RI 02882	Director Name n/a Street Address City State Zip
Director Name n/a Street Address City State Zip	Director Name n/a Street Address City State Zip

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

AUTHORIZED SHARES
Number of Shares Class/Series Par Value
600 SHS NO PAR COMMON

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

ISSUED SHARES
Number of Shares Class/Series Par Value
100 common -0-

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



File Date: **PAID**
Check No.: **MAR 02 2000**
By: **SECY OF STATE**
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: **Patrick McGlade** Date: **2-24-00**
Print or Type Name of Officer: **Patrick McGlade**
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. 81349		2. Name of Corporation EVN Fisheries, Inc.	
3. Street Address Principal Business Office 13 Sea Lea Drive		City Narragansett	State RI
4. Business Phone No. 401-782-6992		5. State RHODE ISLAND	6. SIC Code 2246
7. Brief Description of the Character of Business Conducted in Rhode Island Commercial fishing and other lawful business.			
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name Patrick McGlade		Vice President Name Patrick McGlade	
Street Address 13 Sea Lea Drive		Street Address 13 Sea Lea Drive	
City Narragansett	State RI	City Narragansett	State RI
Secretary Name Partick McGlade		Treasurer Name Patrick McGlade	
Street Address 13 Sea Lea Drive		Street Address 13 Sea Lea Drive	
City Narragansett	State RI	City Narragansett	State RI
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
Director Name Patrick McGlade		Director Name N/A	
Street Address 13 Sea Lea Drive		Street Address	
City Narragansett	State RI	City	State
Director Name N/A		Director Name N/A	
Street Address		Street Address	
City	State	City	State
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 600 SHS NO PAR COMMON	Class/Series	Number of Shares 100	Class/Series Common
Par Value		Par Value No Par	

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



File Date: Feb 23, 99
Check No.: 10069
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: 2-18-99
Print or Type Name of Officer: Patrick McGlade
Title of Officer: President

1998



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID **81349** 2. **Erin Fisheries, Inc.**

3. Street Address Principal Business Office

15 Rhode Island Avenue

City

Narragansett

State

RI

Zip

02882

4. Business Phone No.

401-782-6992

5. **RHODE ISLAND**

6. SIC **2246**

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

Commercial fishing and other lawful business.

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

President Name

Patrick McGlade

Street Address

15 Rhode Island Avenue

City

State

RI

Zip

02882

Vice President Name

Patrick McGlade

Street Address

15 Rhode Island Avenue

City

State

RI

Zip

02882

Secretary Name

Patrick McGlade

Street Address

15 Rhode Island Avenue

City

State

RI

Zip

02882

Treasurer Name

Patrick McGlade

Street Address

15 Rhode Island Avenue

City

State

RI

Zip

02882

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

Director Name

Patrick McGlade

Street Address

15 Rhode Island Avenue

City

State

RI

Zip

02882

Director Name

n/a

Street Address

City

State

Zip

Director Name

n/a

Street Address

Director Name

n/a

Street Address

City

State

Zip

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

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

600 SHS NO PAR COMMON

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

ISSUED SHARES

Number of Shares

Class/Series

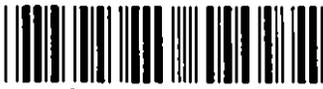
Par Value

100

Common

No par value

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



* 8 1 3 4 9 *

File Date: 2.5.98

Check No.: 5531

By: ICP

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.

Patrick McGlade 1-29-98
Signature of Officer Date

Patrick McGlade

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. 0081349
2. Name of Corporation Erin Fisheries, Inc.
3. Street Address Principal Business Office 15 Rhode Island Avenue
City Narragansett State RI Zip 02882
4. Business Phone No. (401) 782-6992
5. State of Incorporation Rhode Island
6. SIC Code 2246
7. Brief Description of the Character of Business Conducted in Rhode Island
Commercial fishing and other lawful business.

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

President Name Patrick McGlade Street Address 15 Rhode Island Avenue City Narragansett State RI Zip 02882	Vice President Name Patrick McGlade Street Address 15 Rhode Island Avenue City Narragansett State RI Zip 02882
Secretary Name Patrick McGlade Street Address 15 Rhode Island Avenue City Narragansett State RI Zip 02882	Treasurer Name Patrick McGlade Street Address 15 Rhode Island Avenue City Narragansett State RI Zip 002882

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

Director Name Patrick McGlade Street Address 15 Rhode Island Avenue City Narragansett State RI Zip 02882	Director Name Patrick McGlade Street Address 15 Rhode Island Avenue City Narragansett State RI Zip 02882
Director Name Patrick McGlade Street Address 15 Rhode Island Avenue City Narragansett State RI Zip 02882	Director Name Patrick McGlade Street Address 15 Rhode Island Avenue City Narragansett State RI Zip 02882

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
600 shares	no par common		100	common	no par value

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: 3-20-97
Check No.: 5079
By: [Signature] JCC
FOR SECRETARY OF STATE USE ONLY

[Signature] 3-15-97
Signature of Officer Patrick McGlade
Print or Type Name of Officer
President
Title of Officer

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

PLEASE TYPE OR PRINT IN BLACK INK.

1. CORPORATE ID NO. 81349		2. NAME OF CORPORATION Erin Fisheries, Inc.	
3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE 15 RHODE ISLAND AVENUE		CITY NARRAGANSETT	STATE RI
4. BUSINESS PHONE NO. 401-782-6992		5. STATE OF INCORPORATION RHODE ISLAND	6. SIC CODE 2246

7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND
Commercial Fishing & any other lawful business

8. NAMES AND ADDRESSES OF THE OFFICERS		
PRESIDENT NAME DANIEL McCALLIG		VICE PRESIDENT NAME NONE
STREET ADDRESS 15 RHODE ISLAND AVENUE		STREET ADDRESS
CITY NARRAGANSETT	STATE RI	ZIP CODE 02882
SECRETARY NAME DANIEL McCALLIG		TREASURER NAME DANIEL McCALLIG
STREET ADDRESS 15 RHODE ISLAND AVENUE		STREET ADDRESS 15 RHODE ISLAND AVENUE
CITY NARRAGANSETT	STATE RI	ZIP CODE 02882

9. NAMES AND ADDRESSES OF THE DIRECTORS		
DIRECTOR NAME DANIEL McCALLIG		DIRECTOR NAME NOT APPLICABLE
STREET ADDRESS 15 RHODE ISLAND AVENUE		STREET ADDRESS
CITY NARRAGANSETT	STATE RI	ZIP CODE 02882
DIRECTOR NAME NOT APPLICABLE		DIRECTOR NAME NOT APPLICABLE
STREET ADDRESS		STREET ADDRESS
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
600 SHS	NO PAR COMMON		100	Common	No Par Value

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.

Daniel McCallig
Signature of Officer

DANIEL McCALLIG

Print or Type Name of Officer

PRESIDENT

Title of Officer

2/12/96
Date

File Date: 2/13/96
Check No: 1389
By: *cc*
For Secretary of State Use Only



ANNUAL REPORT

Please Type or Print
 File Annually - Jan. 1 - March 1
 Filing Fee \$50.00
 Make Checks Payable to: Secretary of State

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

Corporate ID: 0081349 Annual Report for the year: 1995

Name of Corporation: Erin Fisheries, Inc.

Business entity organized under the laws of the State of: RI
 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):
15 Rhode Island Avenue
Narragansett, RI 02882
 Phone: (401) 782-6992

Brief statement of the character of business conducted in Rhode Island:
Commercial fishing and any other
lawful business.

THE NAMES OF THE OFFICERS ARE:

PRESIDENT	STREET ADDRESS	CITY/STATE	ZIP CODE
Daniel McCallig	15 Rhode Island Avenue, Narragansett,	RI	02882
VICE PRESIDENT	STREET ADDRESS	CITY/STATE	ZIP CODE
SECRETARY	STREET ADDRESS	CITY/STATE	ZIP CODE
Daniel McCallig - Same as above.			
TREASURER	STREET ADDRESS	CITY/STATE	ZIP CODE
Daniel McCallig - Same as above.			

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
Daniel McCallig	15 Rhode Island Avenue, Narragansett,	RI	02882
NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
NAME	STREET ADDRESS	CITY/STATE	ZIP CODE

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
600	Common	100	Common

Date February 17th 19 95

By: Daniel McCallig (President)
 DANIEL MCCALLIG, PRESIDENT
 PRINT OR TYPE NAME OF OFFICER SIGNING
 TITLE OF OFFICER SIGNING

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.

EVERETT A. PETRONIO, JR.
 1233 HARTFORD AVENUE
 P.O. BOX 19040
 JOHNSTON RI 02919

FEB 20 1995
 KC 1045