401.222.3040

(FORM MUST BE TYPED IN BLACK)

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003 Filing Period: January 1 - March 1 • Filing Fee: \$50.00

Name of Corporation SHREDDED FOR	AM PRODUCTS CO	MPANY		
1 Office		City		Zıp
ľ	S. State of Incorporation	PROVIDENCE	RI	02904 6. SIC Code
	RHODE ISLAND			2618
er of Business Conducted SING, SHREDDING	in Rhode Gland PLASTIC LATEX F	OAM		
S OF THE OFFICE	RS ("X" BOX FOR ATTA	CHMENT) [] FILL IN SPACES	BEFORE USING ATTACE	IMENTS
		Vice President Name		
		Street Address		
State	7in	CIN	State	Zφ
RI	•	V.I.y		
		Treasurer Name		
		Milton H. Stallman		
		Street Address		
		Same as above		
State	Zıp	City	State	Zip
S OF THE DIRECT	ORS ("X" BOX FOR AT	TACHMENT) TELL IN SPACE Director Name	S BEFORE USING ATTA	CHMENTS
		Street Address		
	•	Usi Guazgiai ado		
State	Zip	City	State	Zф
		Director Name		
		Street Address		
State	Zıp	City	State	Zip
) ("X" BOX FOR ATTA	ACHMENT) 🔲	11. SHARES ISSUED ("X" BOX	(FOR ATTACHMENT)	
•	´ -	ISSUED SHARES	· -	
Class/Series	Par Value	Number of Shares	Class/Series	Par Value
		50	Common	None
in ink by either th	e President. Vice Pre	sident. Secretary. Assistant	Secretary, Treasurer,	Receiver or Trustee
www.uy.comer.u.		, see, stary, 120000		
 				
1 1 1 1		11-3	المعطو مستكات ليست مساسلات	have evamined
7 4 *				
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:43 PIM*	Į	111.01	11/16	
		//// ton	M /MUXI	Man
EO' HY e	A I P A A D A	Signatule of Officer	Date!	•
2	' "			
	livaoanoo 🕳		r	
	Lavidnogs -			
03:	#B038	Title of Officer		Form 630 12/01
	SHREDDED FOR Office To office State State State State State C'X" BOX FOR ATTA Class/Series in ink by either the To do not be set to office To o	SHREDDED FOAM PRODUCTS CO To Office S. State of Incorporation RHODE ISLAND TO OFFICERS ("A" BOX FOR ATTA STATE STATE Zip RI 02906 State Zip State Zip State Zip C'X" BOX FOR ATTA CHMENT) Class/Series Par Value To Ink by either the President, Vice Presiden	SHREDDED FOAM PRODUCTS COMPANY Office City PROVIDENCE 5. State of incorporation RHODE ISLAND SUBJECT OF STATE OF THE PROPOSE OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES Vice President Name None Street Address State Zip City RI 02906 Treasurer Name Milton H. Stallman Street Address Same as above City State Zip City Director Name Street Address State Number of Shares State Zip City Director Name Street Address State Director Name Street Address State Zip City Director Name Street Address State Director Name Street Address	SHEEDED FOAM PRODUCTS COMPANY Office City State of Incorporation RHODE ISLAND STANDAM STREEDED STAND SOFTHE OFFICERS ("X" BOX FORATTACHMENT) FILL. IN SPACES BEFORE USING ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENT None None Street Address Same as above State Alp City State Alp City State State Ap City State State Ap City State State Ap City State State Ap City State Street Address State Treatment Name Street Address State The City State Director Name Street Address State The City State Director Name Street Address State The City State Director Name Street Address State The City State Director Name Street Address State The City State Under penalty of perjury, I declare and affirm that I this report, including any accompanying schedules and that all statements contained begin up true and State of the City State

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 2002

Filing Period: January 1		iling Fee: \$50.00			
FORM MUST BE TYPED IN 1. Corporate ID No.	BLACK) 2. Name of Corpo.	entina			
11174		FOAM PRODUCTS	S COMPANY		
3. Street Address Principal Bus 55 ASHBURTON STR	iness Office		City PROV I DENCE	State R I	Zip 02904
4. Business Phone No.		5. State of Incorpora		***	6. SIC Code
4018310410		RHODE ISLA			2618
7. Brief Description of the Cha MANUFACTURING, PRO	racter of Business Con CESSING, SHRED	duig 'n Bhode island DING 'PLASTIC LATI	BI FOAM		
8. NAMES AND ADDRES	SSES OF THE OFF	TICERS ("X" BOX FOR	ATTACHMENT)	ACES BEFORE USING AT	TTACHMENTS
President Name			Vice President Name		
Milton H. Stallma	ın		None		
Street Address 5 Linden Drive			Street Address		
	0	-		_	
City Providence	State R I	<i>Zıp</i> 02906	City	State	Zιp
Secretary Name		02300	Treasurer Name		
Milton H. Stallma	ın		Milton H. Stall	man	
Street Address			Street Address		
Same as above			Same as above		
Сту	State	Zip	City	State	Ζφ
9. NAMES AND ADDRES Director Name	SSES OF THE DIR	ECTORS ("X" BOX FO	PRATTACHMENT) FILL, IN S	SPACES BEFORE USING	ATTACHMENTS
None					
Street Address			Street Address		
City	State	Zip	City	State	2 p
Director Name			Dt M		
The court frame			Director Name		
Street Address			Street Address		
City	State	Zıp	City	State	Zıp
10. SHARES AUTHORIZ	LED ("X" BOX FOR	ATTACHMENT)	11. SHARES ISSUED ("X	(" BOX FOR ATTACHMEN	m 🗆
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
600 NO PAR VALUE			50	Common	None
This report must be sign	ed in ink by eithe	er the President, Vice	President, Secretary, Assis	stant Secretary, Treasi	urer, Receiver or Trustee
	i i i i dis i non sist i not				
* 1 1	1 7 4 +			rjury, I declare and affirm	
				g any accompanying sched	
11174 DBG4/2/03/2	11)43 PM	ł	and that all statemen	its contained herein are tr	ie and correct.
File Date		_	, VUI	m. H	hlling
NOV 06	200 3 0, 11d 69	,	Signature of Officer		Date
Check No.		L 19 Noy	Milton H. St	allman	
By Mua	-52n	*	Print or Type Name of		

President

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

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001

ACK)				
2. Name of Corpor	ation	,		_
SHRE ss Office	DDED FOAM PRODUCT	S COMPANY	State	Zip
Street	5. State of Incorporation	Providence	RI	02904 6. SIC Code
er of Business Conducted		AND		2618
g, processing SSES OF THE OF	and shredding places (*X* BOX FOR ATTAC			CHMENTS
allman		None Street Address		
/e				
State	Zip	City	State	Zip
RI	02906	Treasurer Name	•	
allman		Milton H. Stal Street Address	lman	
State	Zip	same as above	State	ZIP
SSES OF THE DIF	ECTORS ("X" BOX FOR ATT	ACHMENT) FILL IN SPACE Director Name	S BEFORE USING AT	TACHMENTS
		Street Address		
State	Zip	Сну	State	Zip
	•	Director Name	•	
		Street Address		
State	Zip	City	State	Zip
ED ("X" BOX FOR AT	TACHMENT)		X° BOX FOR ATTACHMEN	IT)
Class/Series	Par Value	Number of Shares	Class/Series	Par Value
	SHRE Street Street Street Street Street SSES OF THE OFF Allman State STATE	SHREDDED FOAM PRODUCT STREET Street Street State of Incorporation RHODE ISL The of Business Conducted in Rhode Island RHODE ISL The of Business Conducted in Rhode Island RHODE ISL The of Business Conducted in Rhode Island RHODE ISL The of Business Conducted in Rhode Island RHODE ISL The of Business Conducted in Rhode Island RHODE ISL The of Business Conducted in Rhode Island The of Business C	SHREDDED FOAM PRODUCTS COMPANY SOffice Street Street Providence S. State of Incorporation RHODE ISLAND The of Business Conducted in Rhade Island RHODE ISLAND RHODE ISLAND RHODE ISLAND RHODE ISLAND REPOSSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES IN None Street Address State Stat	2. Name of Corporation SHREDDED FOAM PRODUCTS COMPANY City State Street Providence RI RHODE ISLAND The of Business Conducted in Rhode island RHODE ISLAND The of Business Conducted in Rhode isla

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

50

File Date:	FILED
Check No.:	MAY 25 2001
	Cc 00/0012
<i>By:</i> For secretar	Y OF STATE USE ONLY

600 No par value

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.

Common

Milton H. Stallman Print or Type Name of Officer

<u>Pre</u>sident

Title of Officer

C-- 420 12400

None

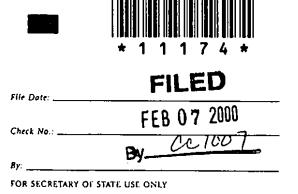
PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000

STOP PLEASE READ PAYORLE HIGHS

Filing Period: January 1-March I • Filing Fee: \$50.00 (FORM MUST BE TYPED IN BLACK) 1. Corporate ID No 11174 SHREDDED FOAM PRODUCTS COMPANY 3. Street Address Principal Business Office 55 Ashburton Street Providence RI 02904 4. Business Phone No. 5. State of Incorporation RHODE ISLAND 401-831-0410 . 7. Brief Description of the Character of Business Conducted in Rhode Island Manufacturing, processing and shredding plastic and latex foam 8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS President Name Vice President Name Milton H. Stallman None Street Address Street Address 5 Linden Drive City State Zip Providence 02906 RI Secretary Name Treasurer Name Milton H. Stallman Milton H. Stallman Street Address Street Address same as above same as above Člty State City State Zip 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Director Name Director Name None Street Address Street Address City State Zip City Zip Director Name Director Name Street Address Street Address City 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 NO PAR VALUE

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

50



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.

Common

None

Miller Hill hours

Milton H. Stallman

Print or Type Name of Officer

President

Signature of Officer



STOP PLEASE READ INSTRUCTIONS

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1999 Filing Period: January 1-March 1 • Filing Fee: \$50.00

FORM MUST BE TYPED IN BLA L Corporate ID No.	CK) 2. Name of Corporation 2. Name of Corporation	•••	•		
11174	• •		COMPANY		
LLL/4 3. Street Address Principal Business		D FOAM PRODUCTS	City	State	Zip
55 Ashburton St	reet		Providence	RI	02904
l. Business Phone No.		5. State of Incorporation			6. SIC Code
401-831-0410 Brief Description of the Character	of Business Conducted in	Rhode Isl Rhode Island	and		2618
manufacturing, B. NAMES AND ADDRES President Name			Stic and latex foam CHMENT) Vice President Name		
Milton H. Stall	man		None Street Address		
5 Linden Drive	State	Zip	City	State	Zip
Providence	RI	02906			
ecretary Name		• •	Treasurer Name		•
Milton H. Stall Greet Address	man		Milton H. Stallma Street Address	n	
same as above			same as above		
City	State	Zip	City	State	Zip
9. NAMES AND ADDRES	SES OF THE DIREC	CTORS ("X" BOX FOR AT	TACHMENT) Director Name		
None					
Street Address			Street Address	-	٠
Stry	State	Zip	City	State	Zip
Director Name		••	Director Name	• • • • •	
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZE	D (*X* BOX FOR ATTAC	CHMENT)	11. SHARES ISSUED (*x* E	OX FOR ATTACHMENT)	
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
600	Common	None	50	Common	None

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

le Date: 🜘	7/99	
Ć	219/9220175	J
heck No.:		/~
" ———		
OR SECRETAR	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

Milton H. Stallman
Print or Type Name 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 BL					
1. Corporate ID No.	2. Name of Corporati				
11174		ED FOAM PRODUC	TS COMPANY		
3. Street Address Principal Busines	**		City	State	Zip
55 Ashburton S	Street		Providence	RI	02904
4. Business Phone No.		5. State of Incorporati			6. SIC Code
401-831-0410 7. Brief Description of the Charact	ter of Business Conducted in	Rhode Is	land		2618
			lastic and latex foam	m	
8. NAMES AND ADDRE President Name	SSES OF THE OFFIC	CERS ("X" BOX FOR AT	TACHMENT) Vice President Name		
Milton H. Sta	llman		None		
Street Address			Street Address		
5 Linden Drive	2				
City	State	Zip	City	State	Zip
Providence	RI	02906			
Secretory Name		•	Treasurer Name	• • • • • • • • • • • • • • • • • • • •	
Milton H. Stal	llman		Milton H. Sta	llman	
Street Address			Street Address		
same as above			same as above		
City	State	Zip	City	State	Zip
9. NAMES AND ADDRE	SSES OF THE DIDE	CTODS (eve boy tob	ATTACULERIT)		
Director Name	SSES OF THE DIRE	CIORS ("A" BUX FUR.	Director Name		
None					
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 AUTHORIZ	ED (*x* box for atta	CHMENT)	11. SHARES ISSUED (*.	X° BOX FOR ATTACHMEN	T)
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Serles	Par Value
600	Common	None	50	Common	None

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

. 1
File Date: 107 99
Check No.: 91859004152
Ву:
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.

MISE 15/1/6/8 4/

Milton H. Stallman

Print or Type Name of Officer

President

Title of Officer

Signature of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1997 Filing Period: January 1-March 1 • Filing Fee: \$50.00



(FORM MUST BE TYPED IN BI	LACK)				
1. Corporate ID No.	2. Name of Corporation	•	, , ,		
11174		FOAM PRODUCT	IS COMPANY		
3. Street Address Principal Busine	**		City	State	Zip
55 Ashburton S 4. Business Phone No.	treet	S. State of Incorpora	Providence	RI	02904 6. SIC Code
401-831-0410 7. Brief Description of the Charac	ter of Business Conducted in R	Rhode Is:	land		2618
manufacturing, 8. NAMES AND ADDRE			lastic and latex foat	m .	
President Name			Vice President Name		
Milton H. Stal Street Address	lman		None Street Address		
5 Linden Drive					
City	State	Zip	City	(State	Zip .
Providence	RI	02906	•		
Secretary Name			Treasurer Name		•••
Milton H. Stal	lman		Milton H. Sta	llman	
			Street Address		
_					
same as above			same as above		
same as above	State	Zip		State	Zip
same as above City 9. NAMES AND ADDRE Director Name		·	same as above : city	State	. , Zip —
same as above City 9. NAMES AND ADDRE Director Name None		·	same as above City ATTACHMENT)	State	. Zip
same as above City 9. NAMES AND ADDRE Director Name None Street Address		·	same as above City ATTACHMENT) Director Name	State	Zip
Same as above City 9. NAMES AND ADDRE Director Name None Street Address City	SSES OF THE DIREC	TORS (*x* BOX FOR	same as above City ATTACHMENT) Director Name Street Address		
Same as above City 9. NAMES AND ADDRE Director Name None Street Address City Director Name	SSES OF THE DIREC	TORS (*x* BOX FOR	same as above City ATTACHMENT) Director Name Street Address City		
Same as above City 9. NAMES AND ADDRE Director Name None Street Address City Director Name Street Address	SSES OF THE DIREC	TORS (*x* BOX FOR	Same as above City ATTACHMENT) Director Name Street Address City Director Name		
Same as above City 9. NAMES AND ADDRE Director Name None Street Address City Director Name Street Address City 10. SHARES AUTHORIZ	SSES OF THE DIREC State	TORS (*X* BOX FOR Zip	Same as above City ATTACHMENT) Director Name City Director Name Street Address	State	Zip Zip
9. NAMES AND ADDRE Director Name None Street Address City Director Name Street Address City	SSES OF THE DIREC State State	TORS (*X* BOX FOR Zip	Same as above City ATTACHMENT) Director Name City Director Name Street Address City 11. SHARES ISSUED (State	Zip Zip

ile Date: 617 99
Theck No.: 91959394752
OR 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.

Milton H. Stallman Print or Type Name of Officer

President



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1996 Filing Period: January 1-March 1 • Filing Fee: \$50.00



(FORM MUST BE TYPED IN BL.	ACK)				
1. Corporate ID No.	2. Name of Corporation	1			`
11174	SHREDDED	FOAM PRODUCT	S COMPANY		
3. Street Address Principal Busines.	s Office		City	State	Zip
55 Ashburton St	reet		Providence	RI	02904
4. Business Phone No.		S. State of Incorporati	lon		6. SIC Code
401-831-0410 7. Brief Description of the Characte	er of Business Conducted in R	Rhode Isl	and		2618
manufacturing, 8. NAMES AND ADDRES President Name			astic and latex foat TACHMENT) Vice President Name	n	
Milton H. Stall Street Address	man		None Street Address		
5 Linden Drive	State	Zip	City	State	Zip
Providence	RI	02906	•		
Secretary Name		02,00	Treasurer Name	•	
Milton H. Stall Street Address	man		Milton H. Stal	lman	
same as above			same as above		
City	State	Zip	City	State	Zip
9. NAMES AND ADDRES Director Name None	SSES OF THE DIREC	TORS (*X* BOX FOR A	ATTACHMENT) 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 AUTHORIZE AUTHORIZED SHARES	D (*X* BOX FOR ATTAC	HMENT)	11. SHARES ISSUED ("X" BOX FOR ATTACHMEN	r)
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Serles	Par Value
600	Common	None	50	Common	None

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

File Date: Co 7 99	
Check No.: 91859384752	
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.

- May 1/1/100 .

Milton H. Stallman

Print or Type Name of Officer

President

Title of Officer

Signature of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1995 Filing Period: January 1-March 1 • Filing Fee: \$50.00

1. Corporate ID No.					
	2. Name of Corporation			•	· -
11174		FOAM PRODUCTS (COMPANY		
3. Street Address Principal Business (Office		City	State	Zip
55 Ashburton Str	eet		Providence	RI	02904
4. Business Phone No.		S. State of Incorporation	•		6. SIC Code
401-831-0410 7. Brief Description of the Character	of Business Conducted in R	Rhode Island	i		2618
manufacturing, p B. NAMES AND ADDRESS President Name			tic and latex foam IMENT) Vice President Name	1	
Milton H. Stallm Street Address	ian		None Street Address		
5' Linden (Drive)					
City	State	Zip	City	State	ZIp
Providence	RI	02906			
Secretary Name			Treasurer Name	1	•
Milton H. Stallm Street Address	nan		Milton H. Stal	lman	
same as above			same as above		
City	State	Zip	City	State	Zip
None Street Address		-	Street Address		
City	State	Zip	City	* State	. Zip
Director Name		• •• ••	Director Name	******	
Street Address			Street Address		
	State	Zip	City	State	Zip
City					
City 10. SHARES AUTHORIZET AUTHORIZED SHARES) ("X" BOX FOR ATTAC	HMENT)	11. SHARES ISSUED (*	"X" BOX FOR ATTACHMEN	· ·
10. SHARES AUTHORIZET) (*X* BOX FOR ATTAC	HMENT) Par Value		"X" BOX FOR ATTACHMEN	(T) . Par Volue

le Date:	oh laa	
ie Date:	0/2/29/2017/52)
:		

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

Milton H. Stallman

Print or Type Name of Officer

President



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1994 Filing Period: January 1-March 1 • Filing Fee: \$50.00

STOP PLEASE READ INSTRUCTIONS

(FORM MUST BE TYPED IN BI	ACK)				
1. Corporate ID No.	2. Name of Corporation	1			`
11174	SHREDDED	FOAM PRODUCTS C	OMPANY		
3. Street Address Principal Busine	ss Office		City	State	ZIp
55 Ashburton St	reet		Providence	RI	02904
4. Business Phone No.		5. State of incorporation			6. SIC Code
401-831-0410		Rhode Island			2618
7. Brief Description of the Charac	ter of Business Conducted in R	hode Island			
manufacturing, 8. NAMES AND ADDRE	-		ic and latex foam MENT)	· -	
President Name			Vice President Name		
Milton H. Stall Street Address	lman		None Street Address		
5 Linden Drive	•				
City	State	Zip	City	State	Zip
Providence	RI	02906	•		•
Secretary Name			Treasurer Name		•
Milton H. Stall	lman		Milton H. Stal	.lman	
Street Address			Street Address		
same as above			same as above		
City	State	Zip	City	State	Zip
9. NAMES AND ADDRE	SSES OF THE DIREC	TORS ("X" BOX FOR ATTA	CHMENT)		
Director Name			Director Name		
None					
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 AUTHORIZ	ED ("X" BOX FOR ATTAC	HMENT)	11. SHARES ISSUED ("X" BOX FOR ATTACHMEN	r)
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
600	Common	None	50	Common	None

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

	0/1/9	ρ	
File Date:	0/1/4	9	
Check No.: _	91269	722475	3
Ву:		<u> </u>	
FOR SECRETA	ARY OF STATE US	E 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.

De 111 1/1/16/16/1/2 1/

Signature of Officer

Milton H. Stallman

Print or Type Name of Officer
President



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1993 Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BL	ACK)				
1. Corporate ID No.	2. Name of Corporation	·	,		
11174	SHREDDED	FOAM PRODUCT	S COMPANY		
3. Street Address Principal Busines	s Office		City	State	Zip
55 Ashburton St 4. Business Phone No.	reet	S. State of Incorporat	Providence	RI	02904 6. SIC Code
401-831-0410 7. Brief Description of the Charact	er of Business Conducted in R	Rhode Isl	and		2618
manufacturing, 8. NAMES AND ADDRE President Name	•		astic and latex foat TACHMENT) Vice President Name	n .	
Milton H. Stall Street Address	man		None Street Address		
5 Linden Drive	State	Zip	City	State	Zip
Providence Secretary Name	RI	02906	Treasurer Name	•	
Milton H. Stall Street Address	man		Milton H. Stal	llman	
same as above			same as above		
City	State	ZIp	City	State	Zip
9. NAMES AND ADDRE	SSES OF THE DIREC	TORS ("X" BOX FOR	ATTACHMENT) Director Name		
None 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 AUTHORIZ AUTHORIZED SHARES	ED (*x* box for attac	HMENT)	11. SHARES ISSUED	("X" BOX FOR ATTACHMENT	r)
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
600	Common	None	50	Common	None

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

10/1/09	
File Date:	
Check No.: 91969 284152	
_	
Ву:	
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.

Date

21 ADRK 99

Milton H. Stallman

Print or Type Name of Officer

President

Signature of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1992 Filing Period: January 1-March I . • Filing Fee: \$50.00

FORM MUST BE TYPED IN BL. I. Corporate ID No.	ACK) 2. Name of Corporatio	r .			
11174 B. Street Address Principal Business	SHREDDED	FOAM PRODUCTS C	OMPANY City	State	Zip
55 Ashburton Sti J. Business Phane No.	reet	. 5. State of Incorporation	Providence	RI	02904 6. SIC Code
401–831–0410 T. Brief Description of the Characte	r of Business Conducted in I	Rhode Isla	nd		2618
manufacturing, p B. NAMES AND ADDRES President Name			ic and latex foam (MENT) Vice President Name		
Milton H. Stallt Greet Address	nan		None Street Address		
5 Linden Drive	6	77	a.	•	***
Providence	State RI	zip 02906	Clty	State .	Zip
Secretary Name	KI	02300	Treasurer Name		• •
Milton H. Stallt Street Address	nan		Milton H. Stal	1man	
same as above	State	Zip	same as above · City	State	Zip
9. NAMES AND ADDRES	SSES OF THE DIREC	CTORS ("X" BOX FOR ATTA	ICHMENT) Director Name		
None Street Address			Street Address	,	
City	State	Zip	City	State	Zip
Director Name		•	Director Name		• •
Street Address			Street Address		
City	State	Zip	Ċiry	State	Zip
10. SHARES AUTHORIZI AUTHORIZZO SHARES	ED ("X" BOX FOR ATTAC	CHMENT)	11. SHARES ISSUED ("X" BOX FOR ATTACHMEN	T)
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
600	Common	None	50	Common	None
This report must be sig i	n ed in ink by eitho	er the President, Vice 1	President, Secretary, Ass	istant Secretary, Treas	urer, Receiver or

e Date: _	10/7	199			
eck No : _	918	X 92	294	75	<u>) </u>
				_	

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.

Date

Signature of Officer

Milton H. Stallman Print or Type Name of Officer

President

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 ID1.1.17.4		KC Annual Report fo	r the year1991
		SHREDDED FOAM PRO	DUCTS COMPANY
THIRD: Character of	business, briefly stated, is.	manufacturing, pr	ocessing and shredding
Fifth: Business add	ress in Rhode Island	Irving I. Waldman	, Esq., 420 Angell St.,
	ddresses of its directors and	d officers:	(Attach rider if necessary)
None	Director		
	Director		······································
	Director	••••••	·····
Milton H. Stallman	nPresident	38 Upton Ave., Pr	ovidence, RI 02906
0pen	Vice Preside	ent	·····
Milton H. Stallwar			·····
Milton H. Stallman	Treasurer	H H	
SEVENTH: Number o	f Shares authorized:		Par Value
No. of Shares	Class	PAID Series	or statement that shares are without
600	common	100 /2 [99] 100 OF STAIL	par value no par
EIGHTH: Number of	Shares issued:		Par Value
No. of Shares	Class	Scries	or statement that shares are without par value
50	common		no par
Dated February		SHREDDED FOAM PRODUCT	allu_
(Report must be sign	ned by an officer)	Title President	

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

State of Uhode Island and Providence Plantations Office of the secretary of state

1,1,7				Annual Report fo	r the year.	1990
*************		The name of		n isSHREDDED		
	SECOND:			the laws ofRho	ode Island	· · · · · · · · · · · · · · · · · · ·
	THIRD:	Character of	business, brief	ly stated, is mai	nufacturin	ng, processing
.and				roducts		
	Fourth:	If foreign		address of its princi	ipal office	N/A
*********	Г ІРТН:	Business add	lress in Rhode	•	***	
	Irvi	ngJWaldma	n, .420. Angell	Street, Providenc	ce, RI 029	06
				s directors and off		
		(Addresses m	ust Include street	and number, if any)		
	N	ame	Office		Address	
None	2	- 124439 - 144111	Director			
		***************************************	Director	· · · · · · · · · · · · · · · · · · ·	·	******
		4	Director	4- 11 () -4 ((((((((((((((((((((((((((((((((((-rapace)etherrareperenchineres(et)
M1-14	on-HSta	11man	President	38UptonAve	Provid	ence, RI 02906
Oper	l		Vice Pres	ident		
			Secretary			
M11t	on H. Sta	llmon pace is needed,	Treasurer	. 9 11		
	SEVENTH	: Number o	f Shares auth	norized:		Par Value
	No. of Shar	778	Class	Series		statement that ires are without par value
	600		common	PA	(ii)	no par
				FFR 2		
	Еіснтн:	Number of	Shares issued			_
	No. of Shar		Class	Series	F STATE or sha	Par Value statement that res are without
	50		V/-33	Series		par value
	50		Common			no par
Date	d: "Feb <u>r</u>	чату	19 <u>90</u>	SHREDDED FOA (North is Conform By U.S.	ation	hel
				(Report must b		
				L. Sport must b	signed by	an officer)

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

Form 31 1/85

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

Corporate ID001	1174	Annual Report for the year	1989
		SHREDDED FOAM PRODUCTS	
		Rhode Island	
THIRD: Character	of business, briefly stated, is	manufacturing, processing	and shredding
plastic and latex f	oam products		
		principal officeN/A	
		Irving J. Waldman, Esq.,	
.Street, Providence,	Rhode Island 02906		
SIXTH: Names and	addresses of its directors as	nd officers: Address (including number, st	(Attach rider if necessary)
.None	Director		
	Director		
	Director		······
MiltonHStallman	President	38UptonAve,Providence	RI 02906
Ореп	Vice Presi	dent	
MiltonHStallman	Secretary	.asabove	•••••
.Milton.HStallman.	Treasurer	ıı ıı	·····
Seventh: Number	of Shares authorized:		Par Value or statement that shares are without
No. of Shares	Class	Series	par value
600	common	PAID	no par
EIGHTH: Number of	of Shares issued:	FEB 2 8 1989	Par Value or statement that
No. of Shares	Class	Series OF STAT	shares are without par value
50	common		no par
DatedFebruary	1989	SHREDDED FOAM PRODUCTS COM (Name of Conforation) By	Pallini
(Report must be	signed by an officer)	President Title	,

State of Rhode Island and Providence Plantations Corporations division 270 WESTMINSTER MALL PROVIDENCE. RHODE ISLAND 02903

Corporate ID. 1111	7.4	Annual Report for the	ie year	ī añ
FIRST: The name of	f the corporation is	SHREDDED FOAM PRI	THET'S COMPANY	•••••
SECOND: It is incorp	porated under the laws of	Shes	de Island	•••••
THIRD: Character o	f business, briefly stated, is	manufacturing,proc	essingandshrede	ding
.plastic and later	x foam products			
FOURTH: If foreign	corporation, address of its	principal officeN/A	······	•••••
FIFTH: Business add	lress in Rhode IslandIxv	ing J. Waldman, Esq.	, 131 Waterman S	t.,
Providence, RI	02906			
SIXTH: Names and a	addresses of its directors an	·	(Attach rider if neco	essary)
None	Director			•••••
	Director			•••••
	Director		······	••••••
Milton H. Stallma	an President	38 Upton Ave., Pro	ovidence, RI 0290	06
Open	Vice Presid	lent		*******
Milton H. Stallma	an Secretary	as above		•••••
Milton H. Stallm	an Treasurer	11 11		
SEVENTH: Number of	of Shares authorized:		Par Value or statement that	
No. of Shares	Class	Series	shares are without par value	
600	common	РАЮ	no par	1)
-		MAR 23 1988		N
Eighth: Number of	f Shares issued:	SEC'Y OF STATE	Par Value or statement that shares are without	
No. of Shares	Class	Series	par value	
50	common		no par	;
Dated 3/4	19 88	SHREDDED FOAM PRODU	CTS COMPANY	
		By W/X/(Mall	lue_	*******
(Report must be si	igned by an officer)	Title President'		·····

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

State of Uhode Island and Providence Plantations Office of the secretary of State

First:	The name of the		Annual Report for is SHREDDED FO	The year 1986
SECOND:	It is incorpora	ited under th	e laws of Rhode	e Island
THIRD:	Character of bus	siness, briefly	stated, is manufa	cturing, processing
nd shredd	ing plastic a	nd latex f	oam_products	
Fourth:			dress of its princip	pal office N/A
Г І гтн :	Business addres			
rving J	Waldman, Esq.	, 131 Wate	rman St., Prov	ridence, RI 02906
Sixth:	Names and add	resses of its	directors and offi	cers:
	(Addresses must	include street a	nd number, if any)	
1	Name	Office	·	Address
one		Director		
	······································	Director		
		Director		
ilton H.	Stallman	President	38 Upton A	ve., Providence, RI
pen		Vice Presid	ient	
ilton H.	Stallman space is needed, at	Treasurer		
SEVENTH	: Number of	Shares autho	rized:	Par Value
No. of Sh	nres .	Class	Series	or statement that shares are without par value
600		common	FEB 2	no par
Еіснтн :	Number of S	hares issued:	:	Par Value or stotement that
No. of Sh	ares	Class	Series	shares are without par value
		common		no par
50				
50 ated: orp. I.D.	enucy 16, #11174	19.86 24/86	SHREDDED F (Name of Corpor	
ated:	enucy 16, #11174		Name of Corpor	6 Mil
ated:	enucy 16, #11174	01/24/86 PAID	(Name of Corpor By H	Mel

State of Rhode Island and Providence Plantations CORPORATIONS DIVISION 270 WESTMINSTER MALL PROVIDENCE, RHODE ISLAND 02903

Corporate ID. 11174			Annual Report for the year 1985		
FIRST: The name of the	corporation is	SHREDDE	D FOAM P	RODUCTS CO	XMPANY
	ed under the la	ws of	R h	ode Island	1
THIRD: Character of business	iness, briefly sta	ated, is	manufac	turing,	processing and shredding
plastic and latex fo	am product	s	••••••	······································	
FOURTH: If foreign corpo	oration, address	of its prin	cipal office	N/A	
FIFTH: Business address i	n Rhode Island	<u>1</u> 292 (Charles	St. Pro	ovidence, RI 02904
SIXTH: Names and addre	sses of its direc	tors and of	ficers:	Address (incl	(Attach rider if necessary) uding number, street, zip code)
.None	Dir	ector	•••••	•••••••••	
	Dir	ector	•••••	•••••	
•••••	Dire	ector	•••••		
Milton H. Stallman	Pre	sident			Providence, RI
0		•			
Milton H. Stallman			as abo		
Milton W Stallman	Sec	•	41	44	
SEVENTH: Number of Shares	ares authorized		c		Par Value or statement that shares are without
600	common	10/03/85		eries -	no par
Еіднтн: Number of Shai	es issued:	5 PAID			Par Value or statement that
No. of Shares	Class		s	eries	shares are without par value
50	common	ANRE CHEK 0102A001	-		no par
Dated Lep	1985	By.	ne of Corporation		AU DUCTS COMPANY
(Report must be signed b	y an officer)	Title	ePresi	dent	••••

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



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

क्षित्र हुन्हें असे			Annual Report for	the year 1984
First:	The name of t	he corporation	is SHREDDED FOAM I	•
SECOND:	It is incorpo	orated under t	he laws of Rhode	Island
THIRD:	Character of b	ousiness, briefl	y stated, is manufac	turing, processing and
shredding	plastic and l	latex foam pro	oducts	
Fourth:	: If foreign	corporation, a	ddress of its princip	al office N/A
Г ІРТН:		ress in Rhode		
Ţry	ring J. Waldma	n, Esg., 131	Waterman St., Provi	Idence 02906
Sixth:	Names and a	ddresses of its	directors and office	ers:
	(Addresses mu	st include street	and number, if any)	
;	Name	Office		Address
No Director		Director		. ()
At A of 118th offen colons	***	Director		
************		Director		
Milton H. S	Stallman	President	38 Upton Aver	nue, Providence, RI
0				
Milton H. S		_	as above	
Milton H. S	Stellmen	Treasurer	as shoue	
(If additional	space is needed.			
SEVENTE	: Number o	f Shares auth	orized:	Par Value or statement that
No. of Sh	nres	Class	Series	shares are without par value
600		common		No Par
Еіснтн	Number of	Shares issued	l:	Par Value
No. of Sh	ares	Class	Series	or statement that shares are without par value
50		соплоп		No Par
ated: Februa	ary 16,	19. ⁸⁴	SHREDDED TOAM (Napp by Coppera	PRODUCTS COMPANY
	APR 10 198	sa Jero	Title Pfes then (Report must be	Y()//////// E signed by an officer)

1983

Filing fee: \$15.00

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

	Α	n <mark>nual R</mark> eport for	the year 1983	
FIRST: The name of			AM PRODUCTS COMPAN	IY,
				
SECOND: It is incorp	porated under the	laws of Rhoo	de Island	
			acturing, processi	ing
and shredding plast				
FOURTH: If foreign	corporation, add	ress of its princi	oal office N/A	
FIFTH: Rusiness ad	dress in Rhode Isl	and (blank reno	rts will be mailed to t	his
dress) Irving J. Wald		•		
•	addresses of its di			*****
\	nust include street and			
Name	Office		Address	
ne	Director			
	Director			
	Director			
lton H. Stallman	President	38 Upton	Avenue, Providence	е
en	Vice Preside	nt .		
lton H. Stallman	Secretary	as above		
lton H. Stallman (If additional space is needed	Treasurer	as above	e e e e e e e e e e e e e e e e e e e	
SEVENTH: Number	of Shares authori	ized:	Par Value or statement that	
No. of Shares	Class	Series	shares are without par value	
600	common	,	without par val	цe
7	4.01	•	Des Volus	
EIGHTH: Number o		S	Par Value or statement that shares are without	
No. of Shares	Class	Series	par value without par val	110
50	COMMOD S		Willione bar van	
ated: February 2	7) 19.83	SHREDDED I	POAM PRODUCTS COMP	ANY
MAR 22 1983	15. B	y Millh	-X/ Mallu	ch
MAN 2~ 1000	A * - c T	itle Presider	nt	
*	ب م ب	•	ha ata-ad ha a a affica a	
·	::]	(Report must	be signed by an officer) 🕛	

Form #9 must be filed. Please contact Corporation Division for information, 277-3040

FORM 31 11-82

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

State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

		Annual Report fo	
FIRST: The name of	the corporation	n is SHREDDED F	COAM PRODUCTS COMPANY
SECOND: It is incorp	orated under t	he laws of Rho	ode Island
THIRD: Character of	business, briefl	y stated, is manu	facturing, processing
and shredding plastic	and latex	foam products	
FOURTH: If foreign	corporation, a	ddress of its prin	cipal office
		•	
			ports will be mailed to this
		-	
•			St., Providence 02906
		s directors and of	ficers:]
(Addresses	must include street	and number, if any)	
Name	Office		Address
No Directors	Director		
******	Director		
	Director		·
Milton H. Stallman	President	38 Upton A	venue, Providence
Open	Vice Presi	dent	
Milton H. Stallman	Secretary	as above	
Milton H. Stallman (If additional space is needed, att	Treasurer	as above	
SEVENTH: Number of	of Shares autho	orized:	Par Value or statement that
No. of Shares	Class	Series	shares are without par value
600	common		without par value
		· it ii - 0.7.1	982. /
EIGHTH: Number of	Shares issued	i: JUL 2	Par Value or statement that
No. of Shares	Class	Series	shares are without par value
50	common		↓ without par value
Dated: March	1982	SHREDDED	foam ² products company
2		(Name of Corporal By	Harman Malle
		Title Pres	ideng
			it be signed by an officer)

If the corporation has changed its registered office and/or its registered agent,

Form #9 must be filed. Please contact Corporation Division for information, 277-3040

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

State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT

OF

SHREDDED FOAM PRODUCTS COMPANY

Pursuant to the provisions of Sect	tion 7.1.1-118 of	the	General I	Laws, 19	956,	as
amended, the undersigned corporation	hereby submits	the	following	annual	repor	rt:

FIRST: The name of the corporation is Shredded Foam Products Company

SECOND: It is incorporated under the laws of Rhode Island

THIRD: The address of its registered office in Rhode Island is 292 Charles Street, Providence, RI

FOURTH: If a foreign corporation, the address of its principal office in the state or country under the laws of which it is incorporated is

FIFTH: The character of the business in which it is actually engaged in Rhode Island, briefly stated, is manufacturing, processing and shredding plastic and latex foam products.

SIXTH: The names and respective addresses of its directors and officers are:

Name	Office			Addres	3	
None	Director					
	Director					
	Director					
	Director					
	Director					
	Director					
Milton H. Stallman	President	150	Morris	Avenue,	Providence,	RI
Open	Vice President			u		
Milton H. Stallman	Secretary	"				
Milton H. Stallman	Treasurer	"	**	(1	II .	"

SEVENTH: The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of	·		Par Value per Share or Statement that Shares are without
Shares	Class	Series	Par Value
			81
600	common		no par
		IR 27 1981 RB	4.
	4	2 24 1381	₩.
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		KP)	4 0
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form 31 :1 80

 ${\bf Eighth:} \quad {\bf The \ aggregate \ number \ of \ its \ issued \ shares, itemized \ by \ classes, \ par \ value \ of \ shares, \ shares \ without \ par \ value, \ and \ series, \ if \ any, \ within \ a \ class, \ is:$

Number of Shares	Class	Series	Par Value per Share or Statement that Shares are without Par Value
	· —		•••
50	common		no par
			!
			-
			~.

Dated 2- 23 ___,19 81

SHREDDED FOAM PRODUCTS COMPANY

(NAME OF CORPORATION)

President

•

FORM 31 35M 8-73

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

State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT

		0	F	1	
		REDDED FO	AM PRODUCT	S COMPANY	
Pursuant t	o the provisiondersigned cor	ns of Section poration hereby	7-1.1-118 of the y submits the follo	General Laws, 19 wing annual report	56, as :
		corporation is			
				npany	
SECOND:	It is incorpora	ited under the l	aws of RHODE !	SLAND	
THIRD: 1	he address of i	its registered of	ffice in Rhode Islar	nd is	-
	292 CHARL	ES STREE	T, PROVIDENC	É	
and the name of	its registered :	agent in Rhode	Island at such add	ress is	
IRVING	WALDMAN.	131 WATER	MAN STREET	PROVIDENCE	
Fourth:	If a foreign co	orporation, the	address of its pri	ncipal office in the st	ate or
country under t	he laws of whic	ch it is incorpo	rated is		
माध्यामः व	he character	of the husiness	in which it is a	tually engaged in	Rhoda
				AND SHREDDIN	
. •	•				<i>/</i> C
75.4377C			PRODUCTS		
• • •					
	he names and r	espective addre	esses of its director	rs and officers are:	
. 200	<i>∨€</i>	Director			
		Director			
		Director			
		Director			-
		Director			
		Director			
ALVIN ST	ALLMAN .	President	150 MORRIS	AVENUE, PRO	/I/DENCE,
	STALLMAN			AVENUE, PROVID	
ALVIN STA	ALLMAN	Secretary		AVENUE, PROVIDE	
MILTON STA		Treasurer		ENUE, PROVIDENC	
SEVENTH:	The aggregat	e number of sha	ares which it has a	uthority to issue, ite	mized
				s, if any, within a cla	
			3	Par Value per Si or Statement th	
Number of Shares		Class	⊱> Series?	Shares are with Par Value	
600	/	common	GO	NO PAR	
		•		•	
			· 6		
			. ــــ • ډر	0.0	10 9 ()
			- n - 0	MAR 28	1300
					Just
			•		
				·	1000

EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares

Class COMMON

Series

Par Value per Share or Statement that Shares are without Par Value NO MR

Dated ////______, 19.80

SHREDDEN

FUAM PRODUCTS COMPANY (NAME OF CORPOBATION)

441hl

Vine PRESIDENT

j.

49788 122 C

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

State of Chode Island and Providence Plantations

-- · · · · OFFICE OF THE SECRETARY OF STATE ANNUAL REPORT

SHREDDED FORM PRODUCTS COMPANY

Pursuant to the provisions of Section 7-1.1-118 of the General Laws, 1956, as amended, the undersigned corporation hereby submits the following annual report:

FIRST: The name of the corporation is SURCEDED FORM PRODUCTS COMPANY

SECOND: It is incorporated under the laws of AHOUE ISLAWA

THIRD: The address of its registered office in Rhode Island is 293 CHARLES STREET, PROVIDENCE

and the name of its registered agent in Rhode Island at such address is

IRVING CUARDINAN, BI WATERINAN STREET, PROVIDENCE

FOURTH: If a foreign corporation, the address of its principal office in the state or country under the laws of which it is incorporated is

FIFTH: The character of the business in which it is actually engaged in Rhode Island, briefly stated, is MANUFACTURING, PROCESSING and SHREDDING PLASTIC and LATEX FORM PRODUCTS

SIXTH: The names and respective addresses of its directors and officers are:

NONE Director

Director Director

Director Director

Director

ALVIN STALLMAN MILTON STALL-MAN ALVIN STALLIMAN

MILTON STALLMAN

President

150 MORRIS AVENUE, PROVIDENCE, RI. Vice President 38 ULTON AVENUE, PROVIDENCE, RI

Secretary

Treasurer

150 MORRIS AJENUE, PROVIDENCE, RI. 38 UPTON AVENUE, FROUNTHCE, RI

SEVENTH: The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Par Value per Share Number of Shares Class Common 79 600

282A14 - - - 15.00B

EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Par Value per Share or Statement that Shares are without Par Value Number of Shares Class Series 100 Common

Dated Jan 19, 1979 SHRENDED FOAM PRODUCTS COMPANY
By/ Melter Mallur

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

State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT

SHREDDED FOAM PRODUCTS COMPANY

Pursuant to the provisions of Section 7-1.1-118 of the General Laws, 1956, as amended, the undersigned corporation hereby submits the following annual report:

FIRST: The name of the corporation is SUKEDUED FOAM PRODUCTS COMPANY

SECOND: It is incorporated under the laws of RHONE ISLAND

THIRD: The address of its registered office in Rhode Island is

292 CHARLES TREET, PROVIDENCE

and the name of its registered agent in Rhode Island at such address is

IRVING WALDINAN, 131 WATERMAN ST., PROVIDENCE

FOURTH: If a foreign corporation, the address of its principal office in the state or country under the laws of which it is incorporated is

FIFTH: The character of the business in which it is actually engaged in Rhode Island, briefly stated, is MANUFACTURING, PROCESSING AND SHREIDING PLASTIC AND LATEX FOAM PRODUCTS

SIXTH: The names and respective addresses of its directors and officers are:

MONE Director Director Director Director Director Director ISO MORRIS AUCHUE, PROVIDENCE, RI ALUIN STALLMAN President Vice President 38 UPTON AUENUC, PROVIDENCE, RI MILLTON STALLMAN 150 MCRRIS AUGNUE, PROVIDENCE, RI. ALVIN STALLMAN Secretary 38 UPTON AVENUE, PROVIDENCE, RI MILTON STALLMAN Treasurer

SEVENTH: The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class Common	Series do 78	Par Value per Share or Statement that Shares are without Par Value
	FEB 21 1978	••••••15,00	
FORM 31 12M 1:73	SAP	2969A14••••15,008L	

 $\label{eq:energy} \textbf{Eighth: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is: \\$

Number of Shares	Class	Series	Par Value per Share or Statement that Shares are without Par Value
100	COMMON		HOPER
			•
Dated 🗸	. ,19. SHRE	SDUED FOAM PR	COUCTS COMPANY PROPRESSION
	By 1	MilmA	(Mul_
		Its .	

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

State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT

OF

SHREDDED FOAM PRODUCTS COMPANY

Pursuant to the provisions of Section 7-1.1-118 of the General Laws, 1956, as amended, the undersigned corporation hereby submits the following annual report:

FIRST: The name of the corporation is

SHREDDED FORM PRODUCTS COMPANY

SECOND: It is incorporated under the laws of RHODE ISLAND

THIRD: The address of its registered office in Rhode Island is

282 CHARLES STREET, PROVIDENCE

FOURTH: If a foreign corporation, the address of its principal office in the state or country under the laws of which it is incorporated is

FIFTH: The character of the business in which it is actually engaged in Rhode Island, briefly stated, is MAHUFACTURING, PROXESSING AND SHREDDING PRODUCTS.

SIXTH: The names and respective addresses of its directors and officers are:

SIXTH: Ine names and respective addresses of its directors and omicers are:

Name
Office
Address

None
Director
Director
Director
Director
Director
Director
President

ALUIN STALLMAN
President

DIRECTORS AVENUE, PROVIDENCE, R. I.

MILITON STALLMAN Vice President 38 UPTON AVENUE, PROVIDENCE, R.I.
ALVIN STALLMAN Secretary ISO MORRIS AVENUE, PROVIDENCE, R.I.
MILTON STALLMAN Treasurer 38 UPTON AVENUE, PROVIDENCE, R.Z.

SEVENTH: The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares

Class

Class

Series

Par Value per Share or Statement that Shares are without Par Value

Common Par Value

Par Value

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FORM 31 12M L-73

EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Par Value per Share or Statement that Shares are without Par Value Number of Shares Class Series COLUMON 100

Dated 120, 1977 SHREDDED FORM PRODUCTS COMPANY
(NAME OF CORPORATION)

By W. W. ONLLIE

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

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

ANNUAL REPORT

OF:

5UN	REDDED FORM	PRODUCTS COMPAN	(£'
amended, the undersigned	l corporation herel	by submits the follow	•
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SECOND: It is incor	porated under the	laws of RHODE	ISIAND
THED: The address	s of its registered (office in Rhode Island	is
282 CHAR	LES STREET,	PROVIDENCE	
and the name of its regist	ered agent in Rhod	ie Island at such add	ress is
ZRUME WALDIT	UN, SE WEY	3055E7 STREE1, /	ROCHDENCE
FOURTH: If a foreign	m cornoration the	address of its princi	pal office in the state or
country under the laws of		-	
country under the laws of	winch it is morp		
			igaged in Rhode Island,
briefly stated, is market			
PLASTIC AND	LATEX FOAM	ERODUCTS.	
SIXTH: The names a	and respective add		and officers are:
NONC	Director		
	Director		
	Director		
	Director		
	Director		
ALVIN STALLIMAN	President	150 MORRIS AVEN	IUE, PROVIDENCE, R.Z.
MILTON STALLMAN			
ALUIN STALLMAN			ME, PROVIDENCE, R.T.
MILTON STALLMAN	•		UE, PROJUDENCE, R.Z.
SEVENTH: The aggre by classes, par value of shar	gate number of sha es, shares without p	ares which it has auth par value, and series, i	nority to issue, itemized if any, within a class, is:
Number of Shares	Class	Series	Par Value per Share or Statement that Shares are without Par Value
600	Common		No CAR

JAN X 1976

FORM 31 204 8-72

EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	<u>Class</u>	Series	Par Value per Share or Statement that Shares are without Par Value
100	COMMON		Ho FAC

Dated 1 Jan 6, 1976

SHREDDED FORM PRADUCTS COMPANY

MANDER OF CORPORATION

By Milly Malling TREASURER

FEB 19-76 STATE 2197 ARGA **15.00

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

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

ANNUAL REPORT

Pursuant to the provisions of Section 7-1.1-118 of the General Laws, 1956, as amended, the undersigned corporation hereby submits the following annual report: FIRST: The name of the corporation is. Sheedded Foam Roducts Company SECOND: It is incorporated under the laws of Rhode Island is 192 Charles Street Roudeme and the name of its registered agent in Rhode Island at such address is IRVINE Waldman, 52 Weybosset Street, Roudeme FOURTH: If a foreign corporation, the address of its principal office in the state or country under the laws of which it is incorporated is. FIFTH: The character of the business in which it is actually engaged in Rhode Island, briefly stated, is Manifecturine, Rocessine and Streedline FIRTH: And Latex Form Preducts SIXTH: The names and respective addresses of its directors and officers are: Office Address None Director Directo		OF.		
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SEVENTH: The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is: Number of Shares Class Series Series Par Value per Share or Statement that Shares are without par Value per Share or Statement that Shares are without par Value per Value per Share or Statement that Shares are without par Value per Value per Share or Statement that Shares are without par Value per Value per Shares are without par Value per Value per Shares are without par Value per Value per Shares are without par Value per Shares				
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by classes, par value of shares, shares without par value, and series, if any, within a class, is: Par Value per Share or Statement that Shares are without Par Value	MUTON STATIMAN	Treasurer	38 UPTON HVE	VUE PROVIDENCE, R.T.
Number of Shares Class Series or Statement that Shares are without Par Value				
Number of Shares are without Shares Par Value Par Value	·	-		Par Value per Share
		Class	Saries	Shares are without
COMMON NO PAR			D DQ 1507	
		OMMON		NO FAR

EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

	Number of Shares	Class		Series	Pnr Vali or Stat Shares : Pai	ne per Share ement that are without Value
	100	Commo	ON			PAR
	•					
			<u>:</u>			
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Dated .	7, 1	9.7.5	Sheedo	LED FOAM	PRODUCTS CORPORATION	COMPANY
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FORM 31 53M 9-72

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

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

ANNUAL REPORT

OF

5	HREDDED FORM	PRODUCTS ComPA	J.Y
Pursuant to the pro amended, the undersigned	visions of Section d corporation herel	7-1.1-118 of the Ge	neral Laws, 1956, as ing annual report:
_	-		······································
SECOND: It is incor	porated under the	laws of Krade Zi	W.N.D.
THIRD: The addres	s of its registered (office in Rhode Island	is
292 CHARLE	ES STRECT, TRE	V.Dence	
and the name of its regist	ered agent in Rhod	le Island at such addr	ess is
IRVING WALDMA	مار حاجا سامع بالأمرية	T. STRECT, PROMO	ENCE
FOURTH: If a forei	on cornoration, the	address of its princin	al office in the state or
country under the laws of	= :		
country under one laws or	winder to an incomp		
Property The shareset			an and in Dhada Island
			gaged in Rhode Island,
briefly stated, is Monus	TRETTURINGS	ESUNG PAIN DIMEED. D	11NG
	ID Antex tas	on IRADUCTS	······································
	and respective add	resses of its directors	and officers are:
Name	Office	A	ddress
,,,,,			×
ALVIN STALLMAN			UE, PROVIDENCE, RI
MILTER STALLMAN			_
ALVIN Stateman	•		UE, TROVIDENCE, RI.
MILTON STALLMAN	Treasurer	38 UPPON AMENUE	E, PROVIDENCE, RI
SEVENTH: The aggre by classes, par value of sha			ority to issue, itemized f any, within a class, is:
			Par Value per Share or Statement that
Number of Shares	Class	Series	Shares are without Par Value
600	Commad		No Piar

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 ${\tt Eighth:} \ \ \, {\tt The aggregate \ number \ of \ its \ issued \ shares, \ itemized \ by \ classes, \ par \ value \ of \ shares, \ shares \ without \ par \ value, \ and \ series, \ if \ any, \ within \ a \ class, \ is:$

Number of Shares Class Series Par Value per Share or Statement that Shares are without Par Value

100 Connect We fine

Dated Jan 25, , 1974

SHREDDED FORM PRODUCTS CONTRAN

By Milpu

Treasurer

FEB 14-74 SEC-0F 1518 AR***15.00

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

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

ANNUAL REPORT

OF

SH	REDIED FORM	PRODUCTO COME	*N/
Pursuant to the pre-	ovisions of Section	7-1.1-118 of the Ge	eneral Laws, 1956, as
amended, the undersigne	ed corporation hereb	y submits the follow	ing annual report:
FIRST: The name			
->#REDDED	FERRY BADUCZS	Comment	
SECOND: It is inco	rporated under the	laws of RHode Za	(41m)
THIRD: The addre	ss of its registered o	office in Rhode Island	is
292 CHRIST	ES STREET, BR	WIDENCE	
and the name of its regis	tered agent in Rhod	e Island at such add	ress is
IRVING WALDEN	2 5 2 Waxibers	AZOSZ, POSNIPOWCE	, B I
FOURTH: If a fore	ign corporation, the	address of its princi	pal office in the state or
country under the laws o			
	- · · · · · · · · · · · · · · · · · · ·		
Firmu. The shown of	tou of the businessin	L:_L :+ : 11	
briefly stated, is MANU			gaged in Rhode Island,
	9 1 00 1 6.X, 17. 6.12.	<i>р</i> ы СМСД.И.С.Т.S	
0		,	***************************************
SIXTH: The names	and respective add	resses of its directors	and officers are:
No.xs	Director		
	Director		
· · · · · · · · · · · · · · · · · · ·	Director		
	Director		
	Director		
	Director		
ALVIN STALLMAN	President	150 MORRIS 1	WE, GOVIDENCE, 8I.
ALVIN STALLMAN PULLTON STALLMAN	Vice Preside	nt 3/9 Spring Co	Charlena Ry
ALVIN STRULMAN	Secretary		, TROVIRONCE R. I.
MILTER STALLMAN	Treasurer		GER RD, WARRICK, RI
SEVENTH: The agor	regate number of she	ares which it has anth	ority to issue, itemized
by classes, par value of sha	res, shares without	par value, and series,	if any, within a class, is:
		•	Par Value per Share
Number of Shares	Class	Series	or Statement that Shares are without Par Value
			* ** * *******************************
6.00	(Schuwow		No PAR

EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	<u>Series</u>	or Statement that Shares are without Par Value
100	Commo		No PAR
:			
-			

Dated anumy 3rd, 1973

SHREDDED FORM PRODUCTS COMPANY

MANY OF CORPORATION: