

FOR SECRETARY OF STATE USE ONLY

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 CORPORTION PROFIT CORPORTION PROFIT CORPORT OF PROFIT CORPORTION PROFIT CORPO	- March 1 •	NNUAL REPO	RT FOR THE YEAR	200	95	
1. Corporate ID No. 43554	2. Name of Corpo	ration L BUSINESS SYSTEMS, 1	NC.			
3 Street Address Principal Busin 15 Circle St			Cuy Rumford	State R I	21p 02916	
4. Business Phone No. 401-435-4900	0	5. State of Incorporation RHODE ISLAN	on		6 SIC Code 6676	
7. Brief SALES AND SERVICE	E OF COMMUNICA				1 00.0	
8. NAMES AND ADDRESS President Name Carol Ann Hi		ERS: ("X" BOX FOR A	TTACHMENT)   FILL IN SE Vice President Sume William F.		G ATTACHMENTS	
Since Aldrew illage I	Drive		Siron Address Village	Drive		
<sup>Cuy</sup> Riverside	State R I	<sup>z</sup> 02915	<sup>City</sup> Riverside	su <b>R</b> I	×02915	
Secretary Name N / A	J,	•••••	Treasurer Name			
Street Address			Street Address			
Cuy	State	Zip	City	State	Zip	
9. NAMES AND ADDRESS Director Name N/A	SES OF THE DIREC	CTORS: ("X" BOX FOR	ATTACHMENT)   FILL IN  Director Napig N/A	I SPACES BEFORE US	I ING ATTACHMENTS	
Street Address			Sircet Address			
City	State	Zip	City	State	Zip	
Director Name	•••••		Director Name			
Street Address	<u>,</u>		Street Address	<del></del>		
City	State	Zip	City	State	Zip	
10. SHARES AUTHORIZE AUTHORIZED SHARES	 ED <i>("X" BOX FOR</i>	ATTACHMENT)	11. SHARES ISSUED (";	[ K" BOX FOR ATTACI	HMENT) 🔲	
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value	
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		either the President, Vic	including any accompa contained herein are tr	ry, I declare and affirm to anying schedules and sta ue and correct.	that I have examined this report	
File Date			Signature of Officer Carol Ann Print or Type Name of C		Date	

Title of Officer



### 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

FORM MUST BE TYPED IN 1. Corporate ID No. 43554	2. Name of Co	rporation EL BUSINESS SYST	EMS, INC.	2. Name of Corporation ECONOTEL BUSINESS SYSTEMS, INC.					
3. Street Address Principal Bu			City	State	Zip				
15 CIRCLE STREET	•		EAST PROVIDENCE	RI	02916				
l. Business Phone No.		5. State of Incorpor	ration	<del></del>	6. SIC Code				
401-435-4900		RHODE ISLA	AND		6676				
. Brief Description of the Ch	aracter of Business	Conducted in Rhode Island			<u> </u>				
Econotel pro	vides te	lecommunicati	ons services and e	auinment					
8. NAMES AND ADDRE	SSES OF THE	FFICERS ("X" BOX FO	RATTACHMENT)   FILL IN SPACE	S BEFORE USING A	ITACHMENTS				
President Name		er i en i de avelant vanis i la lakar i sani	Vice President Name						
CAROL ANN HURLEY			· WILLIAM F. HURLEY						
Street Address			Street Address						
15 CIRCLE STREET			- 15 CIRCLE STREET						
City	State	Zip	City	State	Zip				
EAST PROVIDENCE	RI	02916	· EAST PROVIDENCE	RI	02916				
ecretary Name			Treasurer Name						
N/A				N/A					
Street Address			* Street Address	Sireei Address					
City	State	Zip	*City	State	Zip				
•	[								
9. NAMES AND ADDRE	SSES OF THE D	IRECTORS ("X" BOX F	OR ATTACHMENT)   FILL IN SPA	CES BEFORE USING	ATTACHMENTS				
Director Name			Director Name						
N/A			: N/A						
Street Address			Street Address						
City	State	Zip	·City	State	Zip				
	Sibile	230	·	Sittre	240				
Director Name			Director Name		<b></b>				
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City	State	Zip	.Ciry	State	Zip				
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	<u> </u>		103	COMMON	١				
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	<del></del>		ce President, Secretary, Assistar	<del></del>					

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Check No. 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.

William F. Hurley

Print or Type Name of Officer

Vice President

Title of Officer

Form 630 12/01



Edward S. Inman, III, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

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



(FORM MUST BE TYPED OR PI	UNTED IN BLACK)				- /
1. Corporate ID No.	2. Name of Corpor		• • • • • • • • • • • • • • • • • • • •		
43554	ECONOTE	L BUSINESS SYSTEMS, INC	<b>C</b> .		
3. Street Address Principal Busin			City	State	Zip
15 Circle :	Street		fast Prov.	R. I.	02916
401-435490	Λ	5. State of Incorporation			6. SIC Code
7. Brief Description of the Chara		RHODE ISLAND			6676
Sales And Se	rvice Teleco	ommunications &	Viden Confere	ncina	
8. NAMES AND ADDR	ESSES OF THE OFF	ICERS ("X" BOX FOR ATTAC	VIGCO CONTENE	REFORE LISING ATTAC	UMENTO
President Name		TODIO ( N INN TOR ATTAC)	Vice President Name	BEFORE USING ATTAC	UMENIZ
Carol Ann Hu	rley		William F.	Hurley	
Street Address			Street Address	•	- ·
15 Circle St	reet		15 Circle S	treet	
East Prov.	State D T	, Zip	City	State	Zip
	R. I.	02316	East Prov.	R, I,	02916
Secretary Name Carol Anh Hur	lov	·	Treasurer Name	•	
Street Address	iey .		Carol Ann H	urley	
15 Circle St	reet		Street Address 15 Circle S	troat	
City	State	Zip	City	State	<u>.</u>
East Prov.	R. I.	02916	East Prov.	i R. I.	, 216 , 02916
9. NAMES AND ADDR	ESSES OF THE DIR	ECTORS ("X" BOX FOR ATTA			CHMENTS
Director Name			Director Name	ONE COMO ATTA	
N.	/ A		N.	/ A	
Street Address			Street Address		
Cir.	<del>-</del>	•	-		
City	State	· Zip	City	State	Zip
Director Name	• • • • • • • • • • • • • • • • • • • •		Director Name	**** **	
N.	/ A			/ A	
Street Address	•		Street Address	•	
City	State	Zip	City	State	Zip
10. SHARES AUTHORIS	ZED ("X" BOX FOR ATT	ACHMENT)	11. SHARES ISSUED (	X* BOX FOR ATTACHMENT	<u> </u>
AUTHORIZED SHARES			ISSUED SHARES	•	
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This report			<del></del>	<del></del>	<del></del>
ins report must be sig	gnea in ink by eitl	her the President, Vice F	resident, Secretary, Assi	stant Secretary, Treasu	rer, Receiver or Trustee
/ 11	BENL BIBBB HINEL EDEBL BIDH B	11/111			

	* 4 3 5 5 4 *
File Date:	-15-03
Check No.:	2716
CHECK NO.:	<del></del>

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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.

Mu T.H	5/12/03
ilgnature of Officer	Dhie

WILLIAM	F.	H.	R	LEY
Print or Time Name of	000			

VICE	PRESIDENT
Title of Officer	
<b>◆&gt;</b> 5	

Form 630 12102

Edward S. Inman. III, Secretary of State Corporations Division

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

PROFIT	CORPORATION	ANNUAL REPORT FOR THE YEAR	2002
Filling Period	l: lanuary 1-March 1 •	Filling Fee: \$50.00	

• • • • •				
PROFIT CORPORATION Filling Period: January 1-March 1	N ANNUAL REP	ORT FOR THE	YEAR <u>2</u>	002 STOP
(FORM MUST BE TYPED IN BLACK)				
1. Corporate ID No. 2. Name of Corp	oration	•		
43554 ECONOT	EL BUSINESS SYSTEMS, INC.			
3. Street Address Principal Business Office	·	City	State	Zip
15 Circle Street 4. Business Phone No. 401-435-4900	5. State of Incorporation RHODE ISLAND	East Prov.	R. I.	6. 9.201 6 6676
7. Brief Description of the Character of Rusiness Conducted	d in Rhode Island			
Sales & Serviceof Com 8. NAMES AND ADDRESSES OF THE OI President Name	munication System FFICERS (*X* BOX FOR ATTACHA	ns andany other (ENT) FILL IN SPACES BI Vice President Name	eFORE USING AT	Kennewis
Carol Ann Hurley Street Address		street Andress iam F. H	urley	
City 15 Circle Street	Zip	<sub>City</sub> 15 Circle St	reet	Zip
East Prov. R. I. Secretary Name	02916	East Prov.	R. I.	02916
Carol Ann Hurley		Carol Ann Hu	rley	
15 Circle Street	<b></b> .	. 15 Circle St	reet	

٠.,		•	21016		Z.IP	City		State	Zip
	East	Prov.	R.	I.	02916	Eas	st Prov.	ът	•
9.	NAMES ANI	DADDRESSES	OF T	HE	UZ916 DIRECTORS (*x* BOX FO	OR ATTACHMENT)	FILL IN SPACE	S BEFORE USING	ATTACHMENTS 02916
	ctor Name				•	Director No.			

N/A N/A Street Address Street Address City Zip State Director Name N/A N/A Street Address Street Address City State

City

State

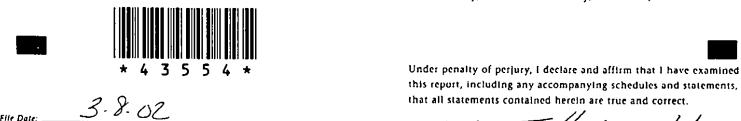
Zip

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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 1,000 NO PAR VALUE 105 Common

Zip

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



this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct. Print or Type Name of Officer FOR SECRETARY OF STATE USE ONLY

Title of Officer

**-** 5

Corporations Division 100 North Main Street, Providence, R1 02903-1335 401-222-3040

### PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001

STOP
PI FASE READ
INSTRUCTIONS

FORM MUST BE TYPED IN BLAC	(K)				
I. Corporate ID No.	2. Name of Corpora	tion -			
43554	ECONOTEL	BUSINESS SYSTEMS,	INC.		
3. Street Address Principal Business O	Office		City	State	Zip
15 Circle Street			East Providence	R. I.	02916
1. Business Phone No.		5. State of Incorporation			6. SIC Code
401-435-4900 7. Brief Description of the Character of Sales and Service	of Business Conducted   Of COMMUNI	RHODE ISLAND  n Rhode Island cation Systems and	i any other lawful p	ourpose	6676
8. NAMES AND ADDRESS President Name	ES OF THE OFF	CERS ("X" BOX FOR ATTACH!		ORE USING ATTACHN	IENTS
Carol Ann Hurley			Vice President Name William F. Hurley		
Street Address			Street Address		
15 Circle Street			15 Circle Street		
City	State	Zip	City	State	Zip
East Providence	R. I.	02916	East Providence Treasurer Name	R. I.	02916
Carol Ann Hurley			Carol Ann Hurley		
Street Address			Street Address		•
15 Circle Street			15 Circle Street		
City	State	Zip	City	State	Zip
East Providence	R. I.	92916	East Providence	R. I.	02916
9. NAMES AND ADDRESS Director Name	ES OF THE DIR	ECTORS ("X" BOX FOR ATTAC	CHMENT) FILL IN SPACES B	EFORE USING ATTAC	HMENTS
N/A			N/A		
N / EN Street Address			Street Address	•	
City	State	Zip	City	State	Zip
Director Name	•			• • •	
			Director Name N/A		
N/A Street Address			IN/ M Street Address		
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City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED AUTHORIZED SHARES	) ("X" BOX FOR ATT	ACHMENT)	11. SHARES ISSUED (*X* E	OX FOR ATTACHMENT)	
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1,000 SHS NO PAR	VAL		105	Common	0

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

	* 4 3 5 5 4 *
File Date:	3/2
Check No.: _	31553
Ву:	21
FOR SECRETA	ARY OF STATE USE ONLY

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

	2/28/01
Signature of Officer	Date
willian & Hujky	
Print or Type Name of Officer	-



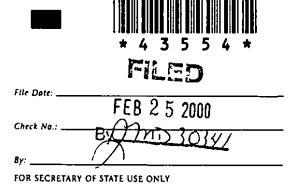
James R. Langevin, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000 Filing Period: January 1-March 1 • Filing Fee: \$50.00



1. Corporate ID No. 43554	ECONOTEL	BUSINESS SYSTEMS	, INC.	•	
3. Street Address Principal Business 15 Circle Street	Office		cny East Providence	State R. I.	zıp 0291
4. Business Phone No.		5. State of Incorporation	Lust 1104 fuelice	N. 1.	
401-435-4900		RHODE ISLAND	)		6. SIC Code
7. Brief Description of the Characte					
		_	any other lawful pur		<b></b>
8. NAMES AND ADDRES President Name	2F2 OF THE OFFI	CERS ("X" BOX FOR ATTAC	HMENT) FILL IN SPACES BEF Vice President Name	ORE USING ATTAC	CHMENTS
Carol Ann Hurley			William F. Hurley		
Street Address	•	•	Street Address		
15 Circle Street	7		15 Circle Street		
East Providence	State R. I.	zιρ 02916	City Eact Drawidance	State D T	Zip 
Secretary Name	., i		East Providence	R .I.	02916
Carol Ann Hurley			Carol Ann Hurley		
Street Address			Street Address		
15 Circle Street			15 Circle Street		
Sity	State	Zip	City	State	Zip
East Providence	R. I.	02916	East Providence	R. I.	02916
9. NAMES AND ADDRES Director Name	2E2 OF THE DIKE	ECTORS (*X* BOX FOR ATT	ACHMENT) FILL IN SPACES B Director Name	EFORE USING ATT	ACHMENTS
N/A			N/A		
Street Address	-	•	Street Address		
City	- + State	Zip	City	State	Zip
Director Name			Director Name		·
N/A Street Address			N/A		
Street Maaress			Street Address		
CITY	State	Zip	City	State	Zip
	•				
10. SHARES AUTHORIZE	D ("X" BOX FOR ATT.	ACHMENT)	11. SHARES ISSUED ('X'	BOX FOR ATTACHMEN	T)
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	· Number of Shares	Class/Series	Par Value
-	: VAL		105	Common	0
1,000 SHS NO PAR					
1,000 SHS NO PAR			,		

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.

Signature of Officer

Carol Ann Hurley Print or Type Name of Officer

President Title of Officer



### STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of title Secretary of State

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

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

STOP
PLEASE READ
INSTRUCTIONS

ORM MUST BE TYPED IN BL Corporate ID No.	2. Name of Corpore				
43554		L BUSINESS SYSTE	MS, INC.		
treet Address Principal Busines	**	· · · · · · · · · · · · · · · · · · ·	City	State	Zip
5 Circle Str	eet		East Providen	ce RI	02916
401) 435-490		5. State of Incarporation RHODE ISLA			6. SIC Code 6878
rief Description of the Charact			•		
NAMES AND ADDE	SCEC OF THE OPE	unication sys	stems and any oth	her lawful pu	rpose
dent Name	agra or the off	ICERS ( A BOX FOR ALL)	: Vice President Name	BEFURE USING AT TAC	HMENIS
arol Ann Hur	ley		William F. I	Hurlev	•
5 Circle Str			Street Address 15 Circle St		
ast Providen	ce State RI	<sup>Zip</sup> 02916	Chy East Provid	dence RI	Zip 0291
tary Name			Trensurer Name		
arol Ann Hur	· ·	··	Carol MAnn_Hi	urley	
5 Circle Str	eet		15_Circle_St	treet_	
ast Providen	cel RI	02916	East Provide	ence RI	02916
NAMES AND ADDRE	SSES OF THE DIR	ECTORS ("X" BOX FOR A	TTACHMENT) , FILL IN SPACE	S BEFORE USING ATT	ACHMENTS
ctor Name			Director Name		
n/A			Street Address		· · · · · · · · · · · · · · · · · · ·
			•		
	State	Zip	City	State	Zip
ctor Name	1	•••••	Director Name		······································
N/A			N/A		
et Address			Street Address		
	State	Zip	City	State	Zip
SHARES AUTHORIZI	ED ("X" BOX FOR ATT	ACHMENT)	11. SHARES ISSUED (	X" BOX FOR ATTACHMENT	<u> </u>
nber of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Far Value
1,000 SHS NO PAR	VAL		105	Common	0
		·			<del></del>
<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.

Check No.:

Signature of Officer
Carol Ann Hurley

Print or Type Name of Officer
President

President

Title of Officer



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

### PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1998 Filing Period: January 1-March 1 • Filing Fee: \$50.00

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15 U	יתחיי	M UJ /	UL	111	LLU	117		LLN	

1. Corporate ID No.

2. Name of Corporation

43554	ECONOTEL	<b>BUSINESS SYSTEI</b>		<b>6</b> 4-4-	71-
3. Street Address Principal Busin 15 CIRCLE S			EAST PROVID	ENCE RI	<sup>Zlp</sup> 02916
4. Business Phone No.	000	5. State of Incorporation	n		6. SIC Code
(401) 435-4		RHODE ISLA	ND		6676
7. Brief Description of the Chard SALE AND SE	RVICE OF COM	n Rhode Island MUNICATION S	STEMS AND ANY	OTHER LAWFUL P	URPOSE
8. NAMES AND ADDR	ESSES OF THE OFFI	CERS ("X" BOX FOR ATT	ACHMENT)		
President Name CAROL ANN H	URLEY		Vice President Name WILLIAM F	. HURLEY	
Street Address 15 CIRCLE S	TREET		Street Address 15 CIRCLE	STREET	
City EAST PROVIDEN	CE RI	02916	EAST PROVIDE	NCE RI	<sup>Zip</sup> 02916
Secretary Name CAROLANN HU	RLEY	•	Treasurer Name CAROL ANN	HURLEY	• •••
Street Address 15 CIRCLE S	TREET		Street Address 15 CIRCLE	STREET	
City EAST PROVIDEN	CE RI	<sup>Z/p</sup> 02916	EAST PROVIDE	NCE RI	<sup>Zip</sup> 02916
9. NAMES AND ADDR	RESSES OF THE DIRI	ECTORS ("X" BOX FOR A	TTACHMENT)		
Director Name N/A			Director Name	A	
Street Address			Street Address	••	
City	State	Zip	City	State	Zip
Director Name	•		Director Name	• • • • • • •	•
N/A Street Address			N/A Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORI	ZED ("X" BOX FOR ATT	ACHMENT)	11. SHARES ISSUED	(*X* BOX FOR ATTACHMEN	T)
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
			105	COMMON	0
1,000 SHS NO PAI	R VAL				
		,			

Title of Officer

	* 4 3 5 5 4 *
File Date:	7/24
Check No.:	18965
Ву:	K.W
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. CAROL MANN HURLEY Print or Type Name of Officer PRESIDENT



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

### 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. 2. Name of Corporation ECONOTEL BUSINESS MOTERIALINESX 43554 3. Street Address Principal Rusiness Office Zip City State 15 Cirle Street. East Providence RI 02916 S. State of Incorporation 4. Business Phone No. 6. SIC Code (401) 435-4900 RHODE ISLAND 6676 7. Brief Description of the Character of Business Conducted in Rhode Island Sale and Service of communication systems and any other lawful purpose 8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) President Name Vice President Name Carol Ann Hurley William F. Hurley Street Address Street Address 15 Circle Street 15 Circle Street City City E. Providence... RI 02916 E. Providencen ..... RI..... .l.....02916 ...... Secretary Name Treasurer Name Carol Ann Hurley Carol Ann Hurley Street Address Street Address 15 Circle Street 15 Circle Street City State City E. Providence RI 02916 E. Providence 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) Director Name Director Name N/A Street Address Street Address Director Name Director Name Street Address Street Address : Clly City State Zip 10. SHARES AUTHORIZED AND ISSUED (\*X\* BOX FOR ATTACHMENT) AUTHORIZED SHARES ISSUED SHARES Number of Shares Class/Series Par Volue Class/Series 1,000 SHS NO PAR VAL common 0 This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee T 18 844 84 88 84 1181 94491 84111 9491 4891

	* 4 3 5 5 4 *
	4/3/97
File Date:	101/2
Check No.:	11) 6
Ву:	COX
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.

Carolan Vally sus April 1917

Carol Ann Hurley
Print or Type Name of Officer

President

### **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

AND A DESCRIPTION OF CONTROLLED ROOF SAME  (401) 435-4900 RHODE ISLAND  8 NAMES AND ADDRESSES OF THE DEFICERS  SOUTH WARE Carol Ann Hurley  ET ADDRESS  15 Circle Street  E. Providence  RI  15 Circle Street  TRUSPESS  T	E. Providence RI 02916  REPOWNIGH  HODE ISLAND 6 SECODE 6676  Systems and any other lawful purpose  DAID RESSES OF THE OFFICERS  WICE PRESCRITIANNE William F. Hurley  STREET ADDRESS 15 Circle Street  OTY Carol Ann Hurley  STREET ADDRESS 15 Circle Street  OTY STREET ADDRESS  OTHER DIRECTOR STATE OTHER DIREC
STATE OF MANNES  15 Circle Street  16 STATE OF MODER ISLAND  16 SCORE RHODE ISLAND  16 SCORE RHODE ISLAND  17 THE OFFICERS  18 NAMES AND ADDRESSES OF THE DIRECTORS  18 NAMES AND ADDRESSES  18 NAMES AND ADDRESSES OF THE DIRECTORS  18 NAMES AND ADDRESSES  F THE DIRECTORS  18 NAMES AND ADDRESSES  18 NAMES AND ADDRESSES  18 NAMES AND ADDRESSES  18 NAMES AND ADDRESSES OF THE DIRECTORS  18 NAMES AND ADDRESSES  18 NAMES AND ADDRESSES  18 NAMES AND ADDRESSES  18 NAMES AND	E. Providence RI 02916  PRODE ISLAND 6. SECODE 6676  Systems and any other lawful purpose  D. AODRESSES OF THE OFFICERS WICE PRESIDENT NAME WILLIAM F. Hurley  STREET ADDRESS  15 Circle Street  OIY Carol Ann Hurley  STREET ADDRESS  15 Circle Street  OIY STREET ADDRESS  15 Circle Street  OIY STREET ADDRESS  15 Circle Street  OIY STREET ADDRESS  16 F. Providence RI O2916  A O D RESSES OF THE DIRECTORS  OORCIOR NAME  N/A  STREET ADDRESS  CIY STATE DIRECTOR NAME  STREET ADDRESS
AND ADDRESS TO CARD AND HURLEY  SOUTH MAKE  CAROL AND HURLEY  STATE  B. NAMES AND ADDRESSES OF THE DEFICERS  MCE MESOCON MAKE  CAROL AND HURLEY  STATE  B. NAMES AND ADDRESSES OF THE DEFICERS  MCE MESOCON MAKE  CAROL AND HURLEY  STATE  DEFOON  CAROL AND HURLEY  STATE  DEFOON  CAROL AND HURLEY  STATE  DEFOON  CAROL AND HURLEY  STATE  DEFOON	HODE ISLAND  6 SECODE 6676  Systems and any other lawful purpose  DAGORESSES OF THE OFFICERS WEEPESDENTHAWE William F. Hurley  STREET ADDRESS  15 Circle Street  OTY Carol Ann Hurley  STREET ADDRESS  15 Circle Street  Carol Ann Hurley  STREET ADDRESS  15 Circle Street  OTY STREET ADDRESS  ORECTOR NAME  OTY STREET ADDRESS  ORECTOR NAME  STREET ADDRESS  OTHER OTHER OFFICERS  OTHER OTHER OFFICERS  OTHER OFFICERS  OTHER OTHER OFFICERS  OTHER OTH
RHODE ISLAND  RHODE ISLAND  6676  REFECTION FOR COMMUNICATION NECOCION NECO	HODE ISLAND  6676  Systems and any other lawful purpose  A O DRESSES OF THE OFFICERS  WILLIAM F. Hurley  STREET ADDRESS  15 Circle Street  OTH  Carol Ann Hurley  STREET ADDRESS  15 Circle Street  OTH  Carol Ann Hurley  STREET ADDRESS  15 Circle Street  OTH  STATE  OPTONO  OPTONO  OPTONO  ON  STATE  OPTONO  OPTONO  OPTONO  ON  STATE  OPTONO
SOLNI NAME CATOL Ann Hurley EFLADORSS  15 Circle Street  E. Providence CATOL Ann Hurley EFLADORSS  15 Circle Street  E. Providence RI  DFCOOK CATOL Ann Hurley  EFLADORSS  15 Circle Street  E. Providence RI  DFCOOK CATOL Ann Hurley  DFCOOK CATOL Ann Hurley  DFCOOK CATOL Ann Hurley  DFCOOK  E. Providence RI  DFCOOK  O2916  E. Providence RI  DFCOOK  O2916  E. Providence RI  DFCOOK  O2916  DFCOOK  DOCTOR NAME  N/A  DFCOOK  O17  DFCOOK  O2916  DFCOOK  O17  DFCOOK  O2916  DFCOOK  O17  DFCOOK  O2916  DFCOOK  O17  STATE  DFCOOK  O17  DFCOOK	A O D R E S S E S O F T H E O F F I C E R S  WILLIAM F. Hurley  SITRET ADDRESS  15 Circle Street  20 COTY  E. Providence  TREASURER NAME  Carol Ann Hurley  SITRET ADDRESS  15 Circle Street  COTY  E. Providence  RI  O2916  A O D R E S S E S O F T H E D I R E C T O R S  OGRECTOR NAME  N/A  SITRET ADDRESS  CITY  DIRECTOR NAME  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS
Carol Ann Hurley  Carol Ann Hurley  ET ADDRESS  STATE  STA	William F. Hurley  STREET ADDRESS  15 Circle Street  OTY  E. Providence  TREASURER NAME Carol Ann Hurley  STREET ADDRESS  15 Circle Street  OOP E. Providence  RI  O2916  A D O R E S S E S O F T H E D I R E C T O R S  ORECTOR NAME  n/a  STREET ADDRESS  OTHER D I R E C T O R S  OTHER D I R E C T O
15 Circle Street  E. Providence RI 02916 E. Providence RI 02916  ETANTIAME  CATOL Ann Hurley  ETANORESS  15 Circle Street  Decorate  E. Providence RI 02916  E. Providence RI 02916  E. Providence RI 02916  STATE DECORE  9 NAMES AND ADDRESSES OF THE DIRECTORS  ORIGIONAME  10/a  ETANORESS  STREET ADDRESS	THEASURER NAME Carol Ann Hurley  STREET ADDRESS 15 Circle Street  GIY FE. Providence  THE DIRECTOR NAME TO BE SES OF THE DIRECTORS  ODECTOR NAME TO BE STREET ADDRESS  STREET ADDRESS  CITY  STATE TO DECOME TO DECOME TO DECOME TO DECOME TO DECOME  DECOME  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS
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Carol Ann Hurley  RETADORESS  15 Circle Street  Y. E. Providence  RI DP DODE  O2916  E. Providence  RI DO D RESSES OF THE DIRECTORS  O2916  ECTOR NAME  In/a  RETADORESS  STATE  DOCECTOR NAME  IN/A  STATE  DOCECTOR NAME  OA  STREET ADDRESS  STATE  DRECTOR NAME	Carol Ann Hurley  STREET ADDRESS  15 Circle Street  6 E. Providence RI 02916  A O D R E S S E S O F T N E D I R E C T O R S.  DORECTOR NAME  DIRECT ADDRESS  CITY STATE D P CODE  DARECTOR NAME  STREET ADDRESS
STREET ADDRESS  15 Circle Street  Let address  STREET ADDRESS	STREET ADDRESS  15 Circle Street  6 E. Providence RI 02916  A O D R E S S E S O F T H E D I R E C T O R S.  ORECTOR NAME  T/A  STREET ADDRESS  CITY STATE ZP CODE  DARECTOR HAME  STREET ADDRESS
E. Providence RI 02916 E. Providence RI 029  9. NAMES AND ADDRESSES OF THE DIRECTORS  OPECTOR NAME  1/A  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS  FET ADDRESS  STREET ADDRESS	E. Providence: RI 02916  A 0 D R E S S E S O F T H E D I R E C T O R S  ORECTOR NAME  T/A  STREET ADDRESS  DIRECTOR NAME  STREET ADDRESS
9. NAMES AND ADDRESSES OF THE DIRECTORS.  OGECTOR NAME  1/a  STATE  2P CODE  CITY  STATE  2P CODE  TO SHARES AUTHORIZED AND ISSUED	A O D R E S S E S O F T M E D I R E C T O R S  OCRECTOR NAME  TI / CI  STREET ADDRESS  DIRECTOR NAME  STREET ADDRESS
TO A REET ADDRESS  STREET ADDRESS  STATE  ZP CODE  CITY  STATE  ZP CODE  CITY  STATE  ZP CODE  TO SHARES AUTHORIZED AND ISSUED	TI/A STREET ADDRESS  DITY STATE  DIRECTOR NAME  STREET ADDRESS
STATE ZIP COOR  STATE ZIP COOR  CCTOR HAME  DRECTOR HAME  DRECTOR HAME  STATE ZIP COOR  STATE ZIP COOR  1 0 . S H A R E S A U T H O R I Z E D A H D I S S U E D	DIRECTOR NAME  STREET ADDRESS
DIRECTOR HAME  DIRECTOR HAME  STATE  DIRECTOR HAME  STATE  DIRECTOR HAME  STATE  DIP CODE  1 0 . S H A R E S A U T H O R I Z E D A N D I S S U E D	DIRECTOR HAME STIREET ADDRESS
STATE ZIP CODE CITY STATE ZIP CODE  1 0 . S H A R E S A U T H O R I Z E D A N D I S S U E D	STREET ADORESS
STATE ZIP CODE CITY STATE ZIP CODE	
10. SHARES AUTHORIZED AND ISSUED	CITY STATE ZIP CODE
10. SHARES AUTHORIZED AND ISSUED	STATE ZP CODE
	UTHORIZED AND ISSUED ISSUED SHARES
NUMBER OF SHARES CLASS / SERIES PAR VALUE MUMBER OF SHARES CLASS / SERIES	
1,000 SHS NO PAR VAL 100 common	100 common 0

# 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

### 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:	043554 	Annual Report for the year:	\$95 
Name of Corporation:	ECONOTEL BUST	ESS SYTEMS, INC.	•
Business entity organized For foreign entity, address	under the laws of the State of:and telephone number of principal off	X   Business Corporation (See RIGI	
Island (Provide street addr 15_Circle_			f_communication
Phone: (401 ) 435-4	900		
	THE	AMES OF THE OFFICERS ARE:	
Carol Ann		STREET ADDRESS CITY/STATE 15 Circle Street, East Providence,	RI 02916
William F.	Hurley	STREET ADDRESS CITY/STATE 15 Circle Street, East Providence,  STREET ADDRESS CITY/STATE	
Carol Ann	· <del></del>	15 Circle Street, East Providence,  STREET ADDRESS CITY/STATE	RI 02916
Carol Ann		15 Circle Street, East Providence,	RI 0291 <b>6</b>
NAME N/A	THE N	MES OF THE DIRECTORS ARE: STREET ADDRESS CITY/STATE	7IP CODE
NAME		STREET ADDRESS CITY/STATE	ZIP CODE.
NAME		STREET ADDRESS CITY/STATE	ZIP CODE
NUMBER OF SHARES AU	THORIZED (Rider may be attached)	NUMBER OF SHARES ISSUED AND OUT	STANDING (Rider may be attached)
Number of Shares 1,000	Class/Series	Number of Shares Class / Se 100 common	nes , no par
Date	. 19_95	By:	
	DESIGNATED DECI	TITLE OF OFFICER SIGNING  TERED AGENT FOR SERVICE OF PROCESS:	
PLEASE NOTE: If the rep	gistered office and/or registered agen	ndicated below is incorrect, Form 9 must be filed.	<del>_</del>

WILLIAM J. CONLEY, JR.ESQ 670 WILLETT AVENUE EAST PROVIDENCE RI 02915 FILED
FEB 1 1/1995
By 60 13241

filing Fee \$50.00 payable to Secretary of State

### PLEASE TYPE or PRINT

File Annually LLC: Sept. 1 - Nov. 1 CORP: Jan. 1 - March 1

## 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

Corporate ID: 0043554:	Annual Report for the year: 1994
,	
Name of Business Entity: ECONOTEL BUSINES	SS SYSTEMS, INC.
	Business Entity is (check one):
Business entity organized under the laws of the State of.	bod Business Corporation (See RIGL Chapter 7-1.1)
Federal Taxpayer Identification Number:	[ ] Professional Service Corporation (See RIGL Chapter 7-5.1)
For foreign entity, address and telephone number of principal of	ffice: [ ] Limited Liability Company (See RIGL 7-16)
	Name, title and mailing address of contact person to whom
	communications may be directed:
···································	William J. Conley, Jr.
	670 Willett Avenue
Phone: (	East Providence, RI 02915
Address and telephone of the principal office of business entity	ın Rhode
Island (Provide street address - Not P.O. Box)	Brief statement of the character of business conducted in Rhode Island:
15 Circle Street	Sale and service of communication systems
Fast Providence, RI 02916	and any other lawful purpose.
	Date of Organization June 29, 1987
Phone: (401) 435-4900	Date of Qualification to do business in Rhode Island (if foreign entity):
Phone: 4017 433-4900	
THE	E NAMES OF THE OFFICERS ARE: STREET ADDRESS CITYSTATE ZIP COUR.
Carol Ann Hurley	15 Circle St ., East Providence, RI 02916
☐ CHIEF OPERATING OFFICER OR   M. VICTE PRESIDENT (Check O-x)	STREET ADDRESS CITY/STATE VIP CODE
William F. Hurley	same as above 71F CODE 71F CODE
Carol Ann Hurloy	STREET, ADDRESS
Carol Ann Hurley	Same as above
Carol Ann Hurley	same as above
THE	NAMES OF THE DIRECTORS ARE:
NAME	STREET ADDRESS CITY/STATE ZIP CODE
NAME.	STREET ADDRESS CITYSTATE Z PCODE
SAME	STREET ADDRESS CITY/STATE ZIP CODE
NUMBER OF SHARES AUTHORIZED (If Applicable)	NUMBER OF SHARES ISSUED AND OUTSTANDING (If Applicable)
NUMBER 1,000	NUMBER 100
CLASS COmmon	CLASS common
SERIES	SERIES
PAR VALUE OR no par value	PAR VALUE OR no par value
WITHOUT PAR	WITHOUT PAR
Date February 23	By Cause am Hully
Date	· · · · · ·
	Carol Ann Hurley PREST ON TYPE NAME OF OTEL CHANGING
	President
	TITLE OF OFFICEA SIGNING
Form 31 1.94	
	RED OR RESIDENT AGENT FOR SERVICE OF PROCESS:

PLEASE NOTE: If the Corporation has changed its registered office and/or registered or resident agent, Form 9 or Form LLC 3 must be filed.

WILLIAM J. CONLEY, JR. 670 WILLETT AVENUE E. PROVIDENCE RI 02915 AMI#29

FILED

# State of Alpode Island and Providence Plantations CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

orporate ID0043	554	Annual	Report for the year	1993
First: The name	of the corporation isEC	ONOTEL BUSINES	S SYSTEMS. IN	a
SECOND: It is inco	orporated under the laws of	Rhode Isla	and	
	of business, briefly stated, i	s sale and serv	ice of communi	cation systems
FOURTH: If foreig	n corporation, address of its	principal office		i
FIFTH: Business ac	ddress in Rhode Island	875 Waterman Av	/enue, East Pro	ovidence, RI
SIXTH: Names and	I addresses of its directors a		ddress (including number, st	(Attach rider if necessa
•••••••••••••••••••••••••••••••••••••••	Director		••	
······································	Director			······································
•	Director	· · · · · · · · · · · · · · · · · · ·		
Carol Ann	Hurley President	875 Wat	erman Avenue,	East Providence
William F.	Hurley Vice Presi	dent same as	above	
Carol Ann	Hurley Secretary	same as	above	••••••
Carol Ann	Hurley Treasurer	same as	above	
Seventh: Number	of Shares authorized:			Par Value
No. of Shares	Class	Series		or statement that shares are without par value
Еіднтн: Number o	of Shares issued:	Rec'd & Flied	MAR 2 2 1993	Par Value or statement that
No. of Shares	Class	Series	AMT#29	shares are without par value
3-19	1993	Econote: (Name of Corporation)	Business Syst	ems, Inc.
(Report must be	signed by an officer)		nn Hurley nt	

# State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0043554	•••••	Annual Report for	the year 1992
FIRST: The name of the corp	ooration is ECONO	OTEL BUSINESS SYSTE	EMS, INC.
SECOND: It is incorporated u	inder the laws of	Rhode Island	
THIRD: Character of busines systems and any oth			of communication
FOURTH: If foreign corporati	ion, address of its p	rincipal office	
FIFTH: Business address in R			
	East	Providence, Rhode	Island
SIXTH: Names and addresses	of its directors and		(Attach rider if necessary) ng number, street, zip code)
······································	Director	,	
	Director		
	Director		
Carol Ann Hurley	President	875 Waterman Ave	nue
William F. Hurley	Vice Preside		knode Island
Carol Ann Hurley	Secretary	same as above	
Carol Ann Hurley	Treasurer	same as above	
SEVENTH: Number of Shares	authorized:		Par Value or statement that shares are without
No. of Shares	Class	Series	par value
		Rec'd & Filed	CFB 1 4 1992
EіGHTH: Number of Shares i	d.	. A & Filed	Par Value
Eіднти: Number of Shares i	ssued:	Hec.o.	or statement that shares are without
, No. of Shares	Class	Series	par value
Dated February 17,	19 <u>92</u>	ECONOTEL BUSINESS Name of Corporation)	SYSTEMS, INC.
	E	By Carland	Y-cacley
(Report must be signed by an	n officer) T	Carol Ann Hur Title President	Teà

State of Rhode Island and Providence Plantations,

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

FIRST: The name of the corporation is
SECOND: It is incorporated under the laws of the State_of_Rhode_Island THIRD: Character of business, briefly stated, issale andserviceof communication systems and any other lawful purpose.
systems and any other lawful purpose.
FOURTH: If foreign corporation, address of its principal office.
$oldsymbol{\cdot}$
FIFTH: Business address in Rhode Island 898 Willett Avenue, E. Providence, RI
02915
SIXTH: Names and addresses of its directors and officers:  Name Office Address (including number, street, zip code)
Director
Director
William F. Hurley President 898 Willett Ave., E. Providence, RI 0291
Carol Ann Hurley Vice President 898 Willett Ave., E. Prov., RI 02915
Carol Ann Hurley Secretary 898 Willett Ave., E. Prov., RI 02915
Carol Ann Hurley Treasurer 898 Willett Ave., E. Prov., RI 02915
SEVENTH: Number of Shares authorized: Par Value
No. of Shares Class Series PAID or statement that shares are without
SEVENTH: Number of Shares authorized:  No. of Shares  Class  Class  Series  Par Value or statement that shares are without par value 1000  Common  EIGHTH: Number of Shares issued:  Par Value  OF STATE  Par Value  Par Value OF STATE  Par Value  Par Value OF STATE
OV OF STATE
EIGHTH: Number of Shares issued:  Par Value or statement that
No. of Shares Class Series shares are without par value
100 Common No par
Dated February 15, 19 91 Econotel Business Systems (Name of Corporation)
By By
(Report must be signed by an officer)  Title 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 ID 004358	54	Annual Report for th	e year 1990	
FIRST: The name of	the corporation is	ECONOTEL BUSINESS SYTEMS, INC.		
SECOND: It is incorpo	orated under the laws of	the State of Rhode Isla	ınd	
THIRD: Character of	business, briefly stated, is	sale and service of com	munication systems	
and any other la	wful purpose			
FOURTH: If foreign co		rincipal office		
FiFTH: Business addre		<sup>8</sup> .Willett.Avenue, East.P		
SIXTH: Names and ac	Idresses of its directors and		(Attach rider if necessary	
	Director			
	Director			
	Director		••••••	
William F. Hur	ley President	89 8 Willett Ave., E. F	Providence, RI 02915	
Carol Ann Hurle	y Vice Preside	nt 89.8 Willett Ave., E. I	Providence, RI 02915	
Carol Ann Hurle	y Secretary	89.8 Willett Ave., E. E	rovidence, RI 02915	
Carol Ann Hurle	YTreasurer	89 8 Willett Ave., E. F	Providence, RI 02915	
SEVENTH: Number of	Shares authorized:		Par Value	
No. of Shares	Class	Series	or statement that shares are without par value	
1,000	C	PAID	·	
1,000	Common	FEB 2 6 1990	No par	
EіGнтн: Number of S	hares issued:	0500 05 07	Par Value or statement that	
No. of Shares	Class	Series	shares are without par value	
100	Common		No par	
Dated February 22	1990	Econotel Business Syste	ens	
	ן)	Name of Corporation)	il,	
(Panor must be de-	D and house affice->		- /-	
(Report must be sign	cu by an onicer)	ille President	•••••••••••••••••••••••••••••••••••••••	

## State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION 270 WESTMINSTER MALL PROVIDENCE, RHODE ISLAND 02903 D. 7

Corporate ID	azesa	Annual	Report for the year	198
			BUSINESS SYTEMS, INC.	
_			Shode Island	
THIRD: Charac	ter of business, briefly stat	ted, is		•••••
sale and serv	vice of communication	n systems and any o	ther lawful purpose	•••••
			······································	
895 Willett A	Avenue, East Provider	nce, R.I. 02915		•••••
	and addresses of its direct	ors and officers:	(Attach rider if neo Address (including number, street, zip code)	
none	Direc	ctor	•	
•••••	Direc	ctor		
······	Direc	ctor	······	••••
William F. Hurley	7Presi	dent .895 Willet	Avenue, East Prov., R.I. 029	915
Carol A. Hurley	Vice	President 895 Willet	Avenue, East Prov., R.I. 029	915
	Secre		Avenue, East Prov., R.I. 029	915
Carol A. Hurley	Treas		Avenue, East Prov., R.I. 029	915
SEVENTH: Num	ber of Shares authorized:		Par Value or statement that	
No. of Shares	Class	Series	shares are without par value	
1000	common	PAID	no par value	
Еіднтн: Numb	er of Shares issued:	MAR 04 1988	D. 17.4	
No. of Shares	Class	SEC'Y OF STA	or statement that shares are without par value	
100	common		no par value	
Dated February	19 88	ECONOTEL BUSING (Name of Corporation)	ESS SYSTEMS, INC.	•••••
		By By	- F. Huly	•••••
(Report must	be signed by an officer)	Title Preside	ent	·····