



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

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

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 69961		2. Name of Corporation LUMETTA, INC.			
3. Street Address Principal Business Office 51 ASTER STREET			City W WARWICK	State RI	Zip 02893
4. Business Phone No. 4018219944		5. State of Incorporation RHODE ISLAND			6. SIC Code 810
7. Brief Description of the Character of Business Conducted in Rhode Island DESIGN, MANUFACTURE, & DISTRIBUTION OF TABLES, LIGHTS, OTHER HOUSEHOLD ITEMS OF FURNITURE.					
8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name William Prichett			Vice President Name Virginia I. Menzies		
Street Address 19 Bridge View Dr.			Street Address P. O. Box 3546		
City Jamestown	State RI	Zip 02835	City Peace Dale	State RI	Zip 02882
Secretary Name William Prichett			Treasurer Name William Prichett		
Street Address Same			Street Address Same		
City	State	Zip	City	State	Zip
9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name William Prichett			Director Name		
Street Address Same			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1,200 COMM NO PAR VALUE			100	Common	None

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



6 9 9 6 1

69961 DBC 02/04/05 03:26:02 PM
File Date 2-11-05
Check No. 10633
By: LB
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 Prichett 2-07-05
Signature of Officer Date
William Prichett
Print or Type Name of Officer
President
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

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 69961		2. Name of Corporation LUMETTA, INC.			
3. Street Address Principal Business Office 51 ASTER STREET		City W WARWICK	State RI	Zip 02893	
4. Business Phone No. 4018219944		5. State of Incorporation RHODE ISLAND		6. SIC Code 810	
7. Brief Description of the Character of Business Conducted in Rhode Island DESIGN, MANUFACTURE, & DISTRIBUTION OF TABLES, LIGHTS, OTHER HOUSEHOLD ITEMS OF FURNITURE.					
8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name William Prichett		Vice President Name Virginia I. Menzies			
Street Address 19 Bridge View Dr.		Street Address P. O. Box 3546			
City Jamestown	State RI	Zip 02835	City Peace Dale	State RI	Zip 02882
Secretary Name William Prichett		Treasurer Name William Prichett			
Street Address Same		Street Address Same			
City	State	Zip	City	State	Zip
9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name William Prichett		Director Name			
Street Address Same		Street Address			
City	State	Zip	City	State	Zip
Director Name		Director Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> & ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1,200 COMM NO PAR VALUE			100	Common	None

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



6 9 9 6 1

69961 DBC 01/21/04 04:52:50 PM

File Date 2-5-04

Check No 9070

By: [Signature]

FOR SECRETARY OF STATE USE ONLY

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

Signature of Officer

William Prichett

Print or Type Name of Officer

President

Title of Officer

Form 630 12/01



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 2003

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. *69961*		2. Name of Corporation LUMETTA, INC.		
3. Street Address Principal Business Office ASTER STREET		City W WARWICK	State RI	Zip 02893
4. Business Phone No. 4018219944		5. State of Incorporation RHODE ISLAND		6. SIC Code 810
7. Brief Description of the Character of Business Conducted in Rhode Island DESIGN, MANUFACTURE, & DISTRIBUTION OF TABLES, LIGHTS, OTHER HOUSEHOLD ITEMS OF FURNITURE.				
8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
President Name William Prichett		Vice President Name Virginia I. Menzies		
Street Address 19 Bridge View Dr.		Street Address P.O. Box 3546		
City Jamestown	State RI	Zip 02835	City Peace Dale	State RI
Secretary Name William Prichett		Treasurer Name William Prichett		
Street Address Same		Street Address Same		
City	State	Zip	City	State
9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
Director Name William Prichett		Director Name		
Street Address Same		Street Address		
City	State	Zip	City	State
Director Name		Director Name		
Street Address		Street Address		
City	State	Zip	City	State
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>				
AUTHORIZED SHARES			ISSUED SHARES	
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series
1,200 COMM NO PAR VALUE			100	Common
				None

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



* 6 9 9 6 1 *

69961 DBC27/039:27:57 AM

File Date 2/14/03

Check No. 7248

By: [Signature]

FOR SECRETARY OF STATE USE ONLY

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

Signature of Officer

William Prichett

Print or Type Name of Officer

President

Title of Officer



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Edward S. Inman, III, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-13
401-222-30

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002
Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 69961
2. Name of Corporation LUMETTA, INC.

3. Street Address Principal Business Office

69 Aster St.

4. Business Phone No.

(401) 821-9944

5. State of Incorporation
RHODE ISLAND

City

West Warwick

State

RI

Zip

02893

6. SIC Code

810

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

Design, manufacture & Distribution of tables, lights & other household items of furniture.

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

President Name

William Prichett

Street Address

Secretary Name

William Prichett

Street Address

Same

City

State

Zip

Vice President Name

Virginia I. Menzies

Street Address

Treasurer Name

William Prichett

Street Address

Same

City

State

Zip

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

Director Name

William Prichett

Street Address

Same

City

State

Zip

Director Name

Street Address

City

State

Zip

Director Name

Street Address

City

State

Zip

Director Name

Street Address

City

State

Zip

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

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

1,200 COMM NO PAR VALUE

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

ISSUED SHARES

Number of Shares

Class/Series

Par Value

100

Common

None

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



* 6 9 9 6 1 *

2-4-02

File Date: 6/10/02

Check No.: 2

By: FOR SECRETARY OF STATE USE ONLY

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

Signature of Officer

Date

William Prichett, Pres.

Print or Type Name of Officer

President



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Corporations Division
100 North Main Street, Providence, RI 02903-13
401-222-36

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR **2001**

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

(FORM MUST BE TYPED IN BLACK)



1. Corporate ID No. 69961		2. Name of Corporation LUNETTA, INC.	
3. Street Address Principal Business Office 69 Aster St.		City West Warwick	State RI
4. Business Phone No. (401) 821-9944		5. State of Incorporation RHODE ISLAND	6. SIC Code 810
7. Brief Description of the Character of Business Conducted in Rhode Island Design, manufacture & distribution of tables, lights & other household items of furniture.			
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name William Prichett		Vice President Name William Prichett	
Street Address 19 Bridge View Dr.		Street Address Same	
City Jamestown	State RI	City Same	State RI
Zip 02835		Zip 02835	
Secretary Name William Prichett		Treasurer Name William Prichett	
Street Address Same		Street Address Same	
City Same	State RI	City Same	State RI
Zip 02835		Zip 02835	
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS			
Director Name William Prichett		Director Name William Prichett	
Street Address Same		Street Address Same	
City Same	State RI	City Same	State RI
Zip 02835		Zip 02835	
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS			
ISSUED SHARES			
Number of Shares 1,200 SHS COMM NO PAR VAL	Class/Series Common	Par Value None	
11. SHARES ISSUED (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS			
ISSUED SHARES			
Number of Shares 100	Class/Series Common	Par Value None	

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



* 6 9 9 6 1 *

File Date: **1/23**

Check No.: **4787**

By: **[Signature]**

FOR SECRETARY OF STATE USE ONLY

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

Signature of Officer

William Prichett, Pres.

Print or Type Name of Officer

Date

1-07-01



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-13
401-222-36



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 69961		2. Name of Corporation LUMETTA, INC.	
3. Street Address Principal Business Office 69 Aster St.		City West Warwick	State RI
4. Business Phone No. (401) 821-9944		5. State of Incorporation RHODE ISLAND	
		Zip 02893	6. SIC Code 810
7. Brief Description of the Character of Business Conducted in Rhode Island Design, manufacture & distribution of tables, lights & other household items of furniture.			
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name William Prichett		Vice President Name William Prichett	
Street Address 19 Bridge View Dr.		Street Address Same	
City Jamestown	State RI	City 	State
	Zip 02835		Zip
Secretary Name William Prichett		Treasurer Name William Prichett	
Street Address Same		Street Address Same	
City 	State 	City 	State
	Zip 		Zip
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS			
Director Name William Prichett		Director Name 	
Street Address Same		Street Address 	
City 	State 	City 	State
	Zip 		Zip
Director Name 		Director Name 	
Street Address 		Street Address 	
City 	State 	City 	State
	Zip 		Zip
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)			
AUTHORIZED SHARES			
Number of Shares	Class/Series	Par Value	
1,200 SHS COMM NO PAR VAL			
11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)			
ISSUED SHARES			
Number of Shares	Class/Series	Par Value	
100	Common	None	

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



* 6 9 9 6 1 *

File Date: 2/14/00

Check No.: 3962

By: 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.

William Prichett 01-27-00
Signature of Officer Date

William Prichett

Print or Type Name of Officer

President



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-13
401-222-30

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR **1999**

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

(FORM MUST BE TYPED IN BLACK)



1. Corporate ID No. 69961		2. Name of Corporation LUMETTA, INC.		
3. Street Address Principal Business Office 340 East Shore Rd. 69 Aster St.		City Jamestown WARWICK	State RI	Zip 02835 02893
4. Business Phone No. (401) 423-3788 821-9944		5. State of Incorporation RHODE ISLAND		6. SIC Code 810
7. Brief Description of the Character of Business Conducted in Rhode Island Design, manufacture & distribution of tables, lights & other household items of furniture.				
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
President Name William Prichett		Vice President Name William Prichett		
Street Address 340 East Shore Rd. 19 Bridge View Drive		Street Address Same		
City Jamestown	State RI	Zip 02835	City	State
Secretary Name William Prichett		Treasurer Name William Prichett		
Street Address Same		Street Address Same		
City	State	Zip	City	State
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
Director Name William Prichett		Director Name		
Street Address Same		Street Address		
City	State	Zip	City	State
Director Name		Director Name		
Street Address		Street Address		
City	State	Zip	City	State
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT) <input type="checkbox"/> 11. SHARES ISSUED (*X* BOX FOR ATTACHMENT) <input type="checkbox"/>				
AUTHORIZED SHARES		ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series
1,200 SHS COMM NO PAR VAL			100	Common
				None

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



* 6 9 9 6 1 *

File Date: **Mar 5, 99**

Check No.: **3626**

By: **[Signature]**

FOR SECRETARY OF STATE USE ONLY

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

Signature of Officer: **[Signature]** Date: **2/17/99**

William Prichett, Pres.

Print or Type Name of Officer

President



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

James R. Langevin, Secretary of St.
Corporations Division
100 North Main Street, Providence, RI 02903-13
401-277-30

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

(FORM MUST BE TYPED IN BLACK)



1. Corporate ID No. 69961		2. Name of Corporation LUMETTA, INC.		
3. Street Address Principal Business Office 340 East Shore Rd.		City Jamestown	State RI	Zip 02835
4. Business Phone No. (401) 423-3788		5. State of Incorporation RHODE ISLAND		6. SIC Code 0810
7. Brief Description of the Character of Business Conducted in Rhode Island Design, manufacture & distribution of tables, lights & other household items of furniture				
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>				
President Name William Prichett		Vice President Name William Prichett		
Street Address 340 East Shore Rd.		Street Address Same		
City Jamestown	State RI	Zip 02835	City Jamestown	State RI
Secretary Name William Prichett		Treasurer Name William Prichett		
Street Address Same		Street Address Same		
City Jamestown	State RI	Zip 02835	City Jamestown	State RI
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>				
Director Name William Prichett		Director Name William Prichett		
Street Address Same		Street Address Same		
City Jamestown	State RI	Zip 02835	City Jamestown	State RI
Director Name William Prichett		Director Name William Prichett		
Street Address Same		Street Address Same		
City Jamestown	State RI	Zip 02835	City Jamestown	State RI
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>				
11. SHARES ISSUED (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>				
AUTHORIZED SHARES			ISSUED SHARES	
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series
1,200 SHS COMM NO PAR VAL			100	Common
				NONE

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



* 6 9 9 6 1 *

File Date: **2-19-98**
Check No.: **2404**
By: **WCP**

FOR SECRETARY OF STATE USE ONLY

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

Signature of Officer: **William Prichett** Date: **2-16-98**

Print or Type Name of Officer

President



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-277-3046

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. **69961** 2. Name of Corporation **METALUM, INC.**
3. Street Address Principal Business Office
340 East Shore Rd. City **Jamestown** State **RI** Zip **02835**
4. Business Phone No. **(401) 423-3788** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **0810**

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

Design, manufacture & distribution of tables, lights & other household items of furniture

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

President Name

William Prichett

Street Address

340 East Shore Rd.

City **Jamestown** State **RI** Zip **02835**

Secretary Name

William Prichett

Street Address

Same

City _____ State _____ Zip _____

Vice President Name

William Prichett

Street Address

Same

City _____ State _____ Zip _____

Treasurer Name

William Prichett

Street Address

Same

City _____ State _____ Zip _____

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

Director Name

William Prichett

Street Address

Same

City _____ State _____ Zip _____

Director Name

Street Address

City _____ State _____ Zip _____

Director Name

Street Address

City _____ State _____ Zip _____

Director Name

Street Address

City _____ State _____ Zip _____

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

AUTHORIZED SHARES

Number of Shares Class/Series Par Value

1,200 SHS COMM NO PAR VAL

ISSUED SHARES

Number of Shares Class/Series Par Value

100 Common None

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



* 6 9 9 6 1 *

File Date: 1/16/97

Check No.: 1673

By: CC

FOR SECRETARY OF STATE USE ONLY

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

Signature of Officer

William Prichett

Print or Type Name of Officer

President

Date

1-12-97

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) 277-3046

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

PLEASE TYPE OR PRINT IN BLACK INK.

1. CORPORATE ID NO. 69961		2. NAME OF CORPORATION METALUM, INC.		
3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE 340 East Shore Rd.		CITY Jamestown	STATE RI	
		ZIP CODE 02835		
4. BUSINESS PHONE NO. (401) 423-3788		5. STATE OF INCORPORATION RHODE ISLAND		
		6. SAC CODE 0810		
7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND Design, manufacture & distribution of tables, lights, & other household items of furniture				
8. NAMES AND ADDRESSES OF THE OFFICERS				
PRESIDENT NAME William Prichett		VICE PRESIDENT NAME William Prichett		
STREET ADDRESS 340 East Shore Rd.		STREET ADDRESS Same		
CITY Jamestown	STATE RI	CITY	STATE	
ZIP CODE 02835		ZIP CODE		
SECRETARY NAME William Prichett		TREASURER NAME William Prichett		
STREET ADDRESS Same		STREET ADDRESS Same		
CITY	STATE	CITY	STATE	
ZIP CODE		ZIP CODE		
9. NAMES AND ADDRESSES OF THE DIRECTORS				
DIRECTOR NAME William Prichett		DIRECTOR NAME		
STREET ADDRESS Same		STREET ADDRESS		
CITY	STATE	CITY	STATE	
ZIP CODE		ZIP CODE		
DIRECTOR NAME		DIRECTOR NAME		
STREET ADDRESS		STREET ADDRESS		
CITY	STATE	CITY	STATE	
ZIP CODE		ZIP CODE		
10. SHARES AUTHORIZED AND ISSUED				
AUTHORIZED SHARES			ISSUED SHARES	
NUMBER OF SHARES	CLASS / SERIES	PAR VALUE	NUMBER OF SHARES	CLASS / SERIES
1,200 SHS COMM NO PAR VAL			100	Common
				None

This report must be **SIGNED IN INK** by either the
President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

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

William Prichett
Signature of Officer

William Prichett, Pres.

Print or Type Name of Officer


President

1-209

File Date: **2/2/96**

Check No: **1213**

By: *Smoe/W*

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
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: 0069961 Annual Report for the year: 1995

Name of Corporation: METALUM, INC.

Business entity organized under the laws of the State of: Rhode Island

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

Phone: ()

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

Jamestown, RI 02835

Phone: (401) 423-3788

Business Entity is (check one):

☒ Business Corporation (See RIGL Chapter 7-1.1)

☐ Professional Service Corporation (See RIGL Chapter 7-5.1)

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

Design, manufacture & distribution of table
lights & other household items of furniture.

THE NAMES OF THE OFFICERS ARE:

	STREET ADDRESS	CITY/STATE	ZIP CODE
PRESIDENT <u>William Prichett</u>	<u>340 East Shore Rd.</u>	<u>Jamestown, RI</u>	<u>02835</u>
VICE PRESIDENT <u>William Prichett</u>	<u>Same</u>		
SECRETARY <u>William Prichett</u>	<u>Same</u>		
TREASURER <u>William Prichett</u>	<u>Same</u>		

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
<u>William Prichett</u>	<u>Same</u>		
NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
NAME	STREET ADDRESS	CITY/STATE	ZIP CODE

NUMBER OF SHARES AUTHORIZED (Rider may be attached)

Number of Shares	Class / Series
<u>1,200</u>	<u>Common</u>

NUMBER OF SHARES ISSUED AND OUTSTANDING (Rider may be attached)

Number of Shares	Class / Series
<u>100</u>	<u>Common</u>

Date February 3, 1995

By: 
William Prichett, Pres.

PRINT OR TYPE NAME OF OFFICER SIGNING

TITLE OF OFFICER SIGNING

Form 31 1/85

DESIGNATED REGISTERED AGENT FOR SERVICE OF PROCESS:

PLEASE NOTE: If the registered office and/or registered agent indicated below is incorrect, Form 9 must be filed.

DAVID F. REILLY
22 WEST MAIN STREET, P.O. BOX 457
WICKFORD RI 02852

FILED

FEB 10 1995

By 786

Filing Fee \$50.00
Payable to
Secretary of State

PLEASE TYPE or PRINT
State of Rhode Island and Providence Plantations
Office of The Secretary of State
100 North Main Street
Providence, Rhode Island 02903-1335
401-277-3040

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

Corporate ID: 0069961 Annual Report for the year: 1994

Name of Business Entity: METALUM, INC.

Business entity organized under the laws of the State of Rhode Island

Federal Taxpayer Identification Number: _____

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

Phone: () _____

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

340 East Shore Rd.

Jamestown, RI 02835

Phone: (401) 423-3788

Business Entity is (check one):

- ☒ 1 Business Corporation (See RIGL Chapter 7-1.1)
☐ 2 Professional Service Corporation (See RIGL Chapter 7-5.1)
☐ 3 Limited Liability Company (See RIGL 7-16)

Name, title and mailing address of contact person to whom communications may be directed:

David F. Reilly, Esq. (Registered Agent)

P. O. Box 457

Wickford, RI 02852

Brief statement of the character of business conducted in Rhode Island
Design, manufacture & distribution of tables,
lights & other household items of furniture.

Date of Organization Oct. 14, 1992

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

THE NAMES OF THE OFFICERS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
<input type="checkbox"/> CHIEF EXECUTIVE OFFICER OR <input checked="" type="checkbox"/> PRESIDENT (SEE RIGL 7-1.1)			
<u>William Prichett</u>	<u>340 East Shore Rd., Jamestown, RI</u>	<u>02835</u>	
<input type="checkbox"/> CHIEF FINANCIAL OFFICER OR <input checked="" type="checkbox"/> VICE PRESIDENT (SEE RIGL 7-1.1)			
<u>William Prichett</u>	<u>Same</u>		
<input type="checkbox"/> CLERK AND RECORDS OFFICER <input checked="" type="checkbox"/> SECRETARY (SEE RIGL 7-1.1)			
<u>William Prichett</u>	<u>Same</u>		
<input type="checkbox"/> CHIEF FINANCIAL OFFICER OR <input checked="" type="checkbox"/> TREASURER (SEE RIGL 7-1.1)			
<u>William Prichett</u>	<u>Same</u>		

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
<u>William Prichett</u>	<u>Same</u>		

NUMBER OF SHARES AUTHORIZED (If Applicable)		NUMBER OF SHARES ISSUED AND OUTSTANDING (If Applicable)	
NUMBER	<u>1,200</u>	NUMBER	<u>100</u>
CLASS	<u>Common</u>	CLASS	<u>Common</u>
SERIES		SERIES	
PAR VALUE OR WITHOUT PAR	<u>Without Par</u>	PAR VALUE OR WITHOUT PAR	<u>Without Par</u>

Date: March 8, 1994

By: William Prichett

William Prichett

PRINT OR TYPE NAME OF OFFICER SIGNING

President

TITLE OF OFFICER SIGNING

Form 31 1994

DESIGNATED REGISTERED 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

DAVID F. REILLY
22 WEST MAIN STREET, P.O. BOX 457
WICKFORD RI 02852

Filing Fee \$50.00

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

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

143 mnc

Corporate ID 0069961 Annual Report for the year 1993

FIRST: The name of the corporation is METALUM, INC.

SECOND: It is incorporated under the laws of the State of Rhode Island

THIRD: Character of business, briefly stated, is to own, operate and engage in the business design, manufacture, and distribution of tables, lights, and all other household items of furniture; and to do such other things as are incidental proper or necessary to the operation of the business or to the carrying on

FOURTH: If foreign corporation, address of its principal office of any or all of the purposes not prohibited by law.

FIFTH: Business address in Rhode Island 340 East Shore Road, Jamestown, RI 02835

SIXTH: Names and addresses of its directors and officers:

(Attach rider if necessary)

Name

Office

Address (including number, street, zip code)

William Pritchett	Director	340 East Shore Road, Jamestown, RI 02835
	Director	
	Director	
William Pritchett	President	same as above
William Pritchett	Vice President	same as above
William Pritchett	Secretary	same as above
William Pritchett	Treasurer	same as above

SEVENTH: Number of Shares authorized:

Par Value
or statement that
shares are without
par value

No. of Shares	Class
1,200	common

PAID

no par value

EIGHTH: Number of Shares issued:

Par Value
or statement that
shares are without
par value

No. of Shares	Class
100	common

FEB 08 1993
SECY OF STATE
Series

no par value

Dated 2.5.93 19

METALUM, INC.

(Name of Corporation)

By

William Pritchett

Title

(Report must be signed by an officer)