



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State

Matthew A. Brown, Secretary of State

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

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

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

(FORM MUST BE TYPED OR PRINTED IN BLACK)

Form with sections: 1 Corporate ID No (36763), 2 Name of Corporation (COMMUNICATION ARTS GROUP, INC.), 3 Street Address (300 West Exchange Street), 4 Business Phone No (401-861-1000), 5 State of Incorporation (RHODE ISLAND), 6 SIC Code (7716), 7 Brief Description of the Character of Business (GRAPHIC DESIGN), 8. NAMES AND ADDRESSES OF THE OFFICERS (President: Frederick Lusignan, Vice President: Charles Lusignan, VP Marketing & Sales: Denise Lynn), 9. NAMES AND ADDRESSES OF THE DIRECTORS (Director: Frederick Lusignan, Director: Charles Lusignan, Director: Denise Lynn), 10. SHARES AUTHORIZED (1,000 NO PAR VALUE), 11. SHARES ISSUED (300 Common No Par).

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



\*36763\*

File Date: 5/3/05
Check No: 14174 M 6483
By: emc
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: Frederick Lusignan
Date:
Print or Type Name of Officer: Frederick Lusignan
Title of Officer: President

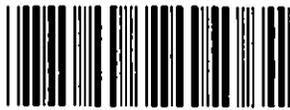


**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004**

Filing Period: January 1 - March 1 • Filing Fee: \$50.00  
(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 36763		2. Name of Corporation COMMUNICATION ARTS GROUP, INC.			
3. Street Address Principal Business Office 300 West Exchange Street			City Providence	State RI	Zip 02903
4. Business Phone No. 401-861-1000		5. State of Incorporation RHODE ISLAND		6. SIC Code 7716	
7. Brief Description of the Character of Business Conducted in Rhode Island GRAPHIC DESIGN.					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Frederick Lusignan			Vice President Name Charles Lusignan VP Marketing & Sales Denise Lynn		
Street Address 300 West Exchange Street			Street Address 300 West Exchange Street		
City Providence	State RI	Zip 02903	City Providence	State RI	Zip 02903
Secretary Name Charles Lusignan			Treasurer Name Frederick Lusignan		
Street Address Same as above			Street Address Same as above		
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 Frederick Lusignan			Director Name Charles Lusignan		
Street Address Same as above			Street Address Same as above		
City	State	Zip	City	State	Zip
Director Name Denise Lynn			Director Name		
Street Address Same as above			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
1,000 NO PAR VALUE			300	Common	No Par

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



\* 3 6 7 6 3 \*

File Date 3/12/04  
Check No. 13680 / M23887  
By: KML  
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 2-17-0  
Print or Type Name of Officer  
Frederick Lusignan  
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 2003**

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 36763		2. Name of Corporation COMMUNICATION ARTS GROUP, INC.			
3. Street Address Principal Business Office 300 West Exchange Street			City Providence	State RI	Zip 02903
4. Business Phone No. 401-863-1000		5. State of Incorporation RHODE ISLAND		6. SIC Code 7716	
7. Brief Description of the Character of Business Conducted in Rhode Island Graphic Design					
<b>8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS</b>					
President Name Frederick Lusignan			Vice President Name Charles Lusignan		
Street Address 300 West Exchange Street			Street Address 300 West Exchange Street		
City Providence	State RI	Zip 02903	City Providence	State RI	Zip 02903
Secretary Name Frederick Lusignan			Treasurer Name Frederick Lusignan		
Street Address 300 West Exchange Street			Street Address 300 West Exchange Street		
City Providence	State RI	Zip 02903	City Providence	State RI	Zip 02903
<b>9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS</b>					
Director Name Frederick Lusignan			Director Name Charles Lusignan		
Street Address 300 West Exchange Street			Street Address 300 West Exchange Street		
City Providence	State RI	Zip 02903	City Providence	State RI	Zip 02903
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
<b>10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/></b>					
AUTHORIZED SHARES			<b>11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/></b>		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1,000 NO PAR VALUE			200	COMMON	NO PAR

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



3 6 7 6 3

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 8/21/03  
 Frederick Lusignan  
 Print or Type Name of Officer  
 President  
 Title of Officer

File Date 8/22/03  
 Check No. 12590380  
 By \_\_\_\_\_  
 FOR SECRETARY OF STATE USE ONLY



**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 **36763** 2. Name of Corporation **COMMUNICATION ARTS GROUP, INC.**  
3. Street Address Principal Business Office **300 West Exchange Street** City **Providence** State **RI** Zip **02903**  
4. Business Phone No **401-861-1000** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **7716**  
7. Brief Description of the Character of Business Conducted in Rhode Island

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

President Name <b>Frederick Lusignan</b> Street Address <b>300 West Exchange Street</b> City <b>Providence</b> State <b>RI</b> Zip <b>02903</b>	Vice President Name <b>Charles Lusignan</b> Street Address <b>300 West Exchange Street</b> City <b>Providence</b> State <b>RI</b> Zip <b>02903</b>
Secretary Name <b>Frederick Lusignan</b> Street Address <b>Same as above</b> City <b>Providence</b> State <b>RI</b> Zip <b>02903</b>	Treasurer Name <b>Frederick Lusignan</b> Street Address <b>Same as above</b> City <b>Providence</b> State <b>RI</b> Zip <b>02903</b>

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

Director Name <b>Frederick Lusignan</b> Street Address <b>Same as above</b> City <b>Providence</b> State <b>RI</b> Zip <b>02903</b>	Director Name <b>Charles Lusignan</b> Street Address <b>Same as above</b> City <b>Providence</b> State <b>RI</b> Zip <b>02903</b>
---	---

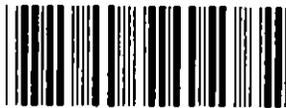
**10. SHARES AUTHORIZED (\*X\* BOX FOR ATTACHMENT)**

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

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

ISSUED SHARES  
Number of Shares Class/Series Par Value  
**200 Common No par**

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



\* 3 6 7 6 3 \*

File Date: 4-12-02  
Check No.: 12823  
By: Km F

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: 4-9-02  
**Frederick Lusignan**  
Print or Type Name of Officer

**President**  
Title of Officer



**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001**  
Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **36763** 2. Name of Corporation **COMMUNICATION ARTS GROUP, INC.**

3. Street Address Principal Business Office **300 West Exchange Street** City **Providence** State **RI** Zip **02903**

4. Business Phone No. **401-861-1000** 5. State of Incorporation **RHODE ISLAND** 6. **7746**

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

**Graphic design**

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

President Name <b>Frederick Lusignan</b>	Vice President Name <b>Charles Lusignan</b>
Street Address <b>300 West Exchange Street</b>	Street Address <b>300 West Exchange Street</b>
City State Zip <b>Providence RI 02903</b>	City State Zip <b>Providence RI 02903</b>
Secretary Name <b>Frederick Lusignan</b>	Treasurer Name <b>Frederick Lusignan</b>
Street Address <b>Same as above</b>	Street Address <b>Same as above</b>
City State Zip <b>Providence RI 02903</b>	City State Zip <b>Providence RI 02903</b>

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

Director Name <b>Frederick Lusignan</b>	Director Name <b>Charles Lusignan</b>
Street Address <b>Same as above</b>	Street Address <b>Same as above</b>
City State Zip <b>Providence RI 02903</b>	City State Zip <b>Providence RI 02903</b>
Director Name	Director Name
Street Address	Street Address
City State Zip	City State Zip

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

AUTHORIZED SHARES	Number of Shares	Class/Series	Par Value
	<b>1,000 SHS NO PAR</b>		

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

ISSUED SHARES	Number of Shares	Class/Series	Par Value
	<b>200</b>	<b>Common</b>	<b>No Par</b>

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



\* 3 6 7 6 3 \*

File Date: **FILED**  
Check No.: **MAR 02 2001**  
By: **By Ce12161**  
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: **3-1-07**  
Print or Type Name of Officer: **Frederick Lusignan**  
Title of Officer: **President**



**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000**

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **36763** 2. Name of Corporation **COMMUNICATION ARTS GROUP, INC.**  
3. Street Address Principal Business Office **300 West Exchange Street** City **Providence,** State **RI** Zip **02903**  
4. Business Phone No **861-1000** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **7716**  
7. Brief Description of the Character of Business Conducted in Rhode Island  
**Graphic Design**

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

President Name <b>Frederick Lusignan</b>	Vice President Name <b>Charles Lusignan</b>
Street Address <b>300 West Exchange Street</b>	Street Address <b>300 West Exchange Street</b>
City State Zip <b>Providence RI 02903</b>	City State Zip <b>Providence RI 02903</b>
Secretary Name <b>Frederick Lusignan</b>	Treasurer Name <b>Frederick Lusignan</b>
Street Address <b>300 West Exchange Street</b>	Street Address <b>300 West Exchange Street</b>
City State Zip <b>Providence RI 02903</b>	City State Zip <b>Providence RI 02903</b>

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

Director Name <b>Frederick Lusignan</b>	Director Name <b>Charles Lusignan</b>
Street Address <b>300 West Exchange Street</b>	Street Address <b>300 West Exchange Street</b>
City State Zip <b>Providence RI 02903</b>	City State Zip <b>Providence RI 02903</b>
Director Name	Director Name
Street Address	Street Address
City State Zip	City State Zip

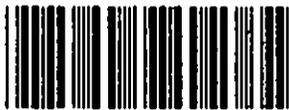
**10. SHARES AUTHORIZED (\*X\* BOX FOR ATTACHMENT)**

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

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

ISSUED SHARES  
Number of Shares Class/Series Par Value  
**200 common no par**

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



\* 3 6 7 6 3 \*

File Date: 1/27/00

Check No.: 11388

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 1-11-00

**Frederick Lusignan**  
Print or Type Name of Officer

**President**  
Title of Officer



**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. **36763** 2. Name of Corporation **COMMUNICATION ARTS GROUP, INC.**

3. Street Address Principal Business Office **300 West Exchange Street** City **Providence** State **RI** Zip **02903**

4. Business Phone No. **751-7270** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **7716**

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

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

President Name <b>Frederick Lusignan</b>	Vice President Name <b>Charles Lusignan</b>
Street Address <b>300 West Exchange Street</b>	Street Address <b>300 West Exchange Street</b>
City <b>Providence</b> State <b>RI</b> Zip <b>02903</b>	City <b>Providence</b> State <b>RI</b> Zip <b>02903</b>
Secretary Name <b>Frederick Lusignan</b>	Treasurer Name <b>Frederick Lusignan</b>
Street Address <b>300 West Exchange Street</b>	Street Address <b>300 West Exchange Street</b>
City <b>Providence</b> State <b>RI</b> Zip <b>02903</b>	City <b>Providence</b> State <b>RI</b> Zip <b>02903</b>

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

Director Name <b>Frederick Lusignan</b>	Director Name
Street Address <b>300 West Exchange Street</b>	Street Address
City <b>Providence</b> State <b>RI</b> Zip <b>02903</b>	City State Zip
Director Name <b>Charles Lusignan</b>	Director Name
Street Address <b>300 West Exchange Street</b>	Street Address
City <b>Providence</b> State <b>RI</b> Zip <b>02903</b>	City State Zip

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

AUTHORIZED SHARES	Number of Shares	Class/Series	Par Value
	<b>1,000 SHS</b>	<b>NO PAR</b>	

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

ISSUED SHARES	Number of Shares	Class/Series	Par Value
	<b>200</b>	<b>Common</b>	<b>No Par</b>

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



\* 3 6 7 6 3 \*

File Date: **FILED**

Check No. **MAR 15 1999**

By: **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 **2-4-99**

Print or Type Name of Officer **FRED LUSIGNAN**

Title of Officer **PRESIDENT**



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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **36763** 2. Name of Corporation **COMMUNICATION ARTS GROUP, INC.**  
3. Street Address Principal Business Office **300 West Exchange Street** City **Providence** State **RI** Zip **02903**  
4. Business Phone No. **(401) 751-7270** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **7716**  
7. Brief Description of the Character of Business Conducted in Rhode Island

Graphic Design

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

<i>President Name</i> <b>Frederick Lusignan</b>	<i>Vice President Name</i> <b>Charles Lusignan</b>
<i>Street Address</i> <b>300 West Exchange Street</b>	<i>Street Address</i> <b>300 West Exchange Street</b>
<i>City</i> <b>Providence</b> <i>State</i> <b>RI</b> <i>Zip</i> <b>02903</b>	<i>City</i> <b>Providence</b> <i>State</i> <b>RI</b> <i>Zip</i> <b>02903</b>
<i>Secretary Name</i> <b>Frederick Lusignan</b>	<i>Treasurer Name</i> <b>Frederick Lusignan</b>
<i>Street Address</i> <b>300 West Exchange Street</b>	<i>Street Address</i> <b>300 West Exchange Street</b>
<i>City</i> <b>Providence</b> <i>State</i> <b>RI</b> <i>Zip</i> <b>02903</b>	<i>City</i> <b>Providence</b> <i>State</i> <b>RI</b> <i>Zip</i> <b>02903</b>

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

<i>Director Name</i> <b>Frederick Lusignan</b>	<i>Director Name</i>
<i>Street Address</i> <b>300 West Exchange Street</b>	<i>Street Address</i>
<i>City</i> <b>Providence</b> <i>State</i> <b>RI</b> <i>Zip</i> <b>02903</b>	<i>City</i> <i>State</i> <i>Zip</i>
<i>Director Name</i> <b>Charles Lusignan</b>	<i>Director Name</i>
<i>Street Address</i> <b>300 West Exchange Street</b>	<i>Street Address</i>
<i>City</i> <b>Providence</b> <i>State</i> <b>RI</b> <i>Zip</i> <b>02903</b>	<i>City</i> <i>State</i> <i>Zip</i>

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

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value
<b>1,000 SHS NO PAR</b>		

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

ISSUED SHARES

Number of Shares	Class/Series	Par Value
<b>200</b>	<b>Common</b>	<b>No Par</b>

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



File Date: 3/6/98  
Check No.: 69784  
By: CL  
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* 2-27-98  
**FREDERICK LUSIGNAN**  
*Print or Type Name of Officer*  
**PRESIDENT**  
*Title of Officer*



**PROFIT CORPORATION ANNUAL REPORT 1997**

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **36763** 2. Name of Corporation **COMMUNICATION ARTS GROUP, INC.**  
3. Street Address Principal Business Office **300 West Exchange St** Providence RI Zip **02903**  
4. Business Phone No. **(401) 751-7270** S. State of Incorporation **RHODE ISLAND** 6. SIC Code **7716**

7. Brief Description of the Character of Business Conducted in Rhode Island  
**Advertising Graphic Design**

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

President Name <b>Frederick Lusignan</b> Street Address <del>65 Warren Avenue</del> <b>300 West Exchange St.</b> City <b>Providence</b> State <b>RI</b> Zip <b>02903</b>	Vice President Name <b>Charles Lusignan</b> Street Address <del>65 Warren Avenue</del> <b>300 West Exchange St.</b> City <b>Providence</b> State <b>RI</b> Zip <b>02903</b>
Secretary Name <b>Frederick Lusignan</b> Street Address <del>65 Warren Avenue</del> <b>300 West Exchange St.</b> City <b>Providence</b> State <b>RI</b> Zip <b>02903</b>	Treasurer Name <b>Frederick Lusignan</b> Street Address <del>65 Warren Avenue</del> <b>300 West Exchange St.</b> City <b>Providence</b> State <b>RI</b> Zip <b>02903</b>

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

Director Name <b>Frederick Lusignan</b> Street Address <del>65 Warren Avenue</del> <b>300 West Exchange St.</b> City <b>Providence</b> State <b>RI</b> Zip <b>02903</b>	Director Name  Street Address  City State Zip
Director Name <b>Charles Lusignan</b> Street Address <del>65 Warren Avenue</del> <b>300 West Exchange St.</b> City <b>Providence</b> State <b>RI</b> Zip <b>02903</b>	Director Name  Street Address  City State Zip

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

AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
<b>1,000 SHS NO PAR</b>			<b>200</b>	<b>Common</b>	<b>No Par</b>

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



File Date: 2/14/97  
Check No.: 9031  
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: [Signature] Date: 2-13-97  
Print or Type Name of Officer: Frederick Lusignan  
Title of Officer: Pres.

# PROFIT CORPORATION ANNUAL REPORT

## 1996



State of Rhode Island and Providence Plantations  
James R. Langevin, *Secretary of State*  
Corporations Division  
100 North Main Street  
Providence, Rhode Island 02903-1335 • (401) 277-3040

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

PLEASE TYPE OR PRINT IN BLACK INK.

1. CORPORATE ID NO. 36763		2. NAME OF CORPORATION COMMUNICATION ARTS GROUP, INC.			
3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE 65 Warren Avenue			CITY East Providence	STATE RI	ZIP CODE 02914
4. BUSINESS PHONE NO. (401) 751-7270		5. STATE OF INCORPORATION RHODE ISLAND			6. SIC CODE 7716
7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND Advertising					
<b>8. NAMES AND ADDRESSES OF THE OFFICERS</b>					
PRESIDENT NAME Frederick Lusignan			VICE PRESIDENT NAME Charles Lusignan		
STREET ADDRESS 65 Warren Avenue			STREET ADDRESS 65 Warren Avenue		
CITY East Providence	STATE RI	ZIP CODE 02914	CITY East Providence	STATE RI	ZIP CODE 02914
SECRETARY NAME Frederick Lusignan			TREASURER NAME Frederick Lusignan		
STREET ADDRESS 65 Warren Avenue			STREET ADDRESS 65 Warren Avenue		
CITY East Providence	STATE RI	ZIP CODE 02914	CITY East Providence	STATE RI	ZIP CODE 02914
<b>9. NAMES AND ADDRESSES OF THE DIRECTORS</b>					
DIRECTOR NAME Frederick Lusignan			DIRECTOR NAME		
STREET ADDRESS 65 Warren Avenue			STREET ADDRESS		
CITY East Providence	STATE RI	ZIP CODE 02914	CITY	STATE	ZIP CODE
DIRECTOR NAME Charles Lusignan			DIRECTOR NAME		
STREET ADDRESS 65 Warren Avenue			STREET ADDRESS		
CITY East Providence	STATE RI	ZIP CODE 02914	CITY	STATE	ZIP CODE
<b>10. SHARES AUTHORIZED AND ISSUED</b>					
AUTHORIZED SHARES			ISSUED SHARES		
NUMBER OF SHARES	CLASS / SERIES	PAR VALUE	NUMBER OF SHARES	CLASS / SERIES	PAR VALUE
1,000 SHS	NO PAR		200	Common	No Par Value

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

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

File Date: 2-27-96

Check No: 8401

By: *RL*  
For Secretary of State Use Only

*Frederick Lusignan*  
Signature of Officer  
Frederick Lusignan  
Print or Type Name of Officer  
President  
Title of Officer  
2-6-96  
Date

DETACH BOTTOM BEFORE RETURNING

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: 0058763 Annual Report for the year: 1995  
 Name of Corporation: COMMUNICATION ARTS GROUP, INC

Business entity organized under the laws of the State of: Rhode Island Business Entity is (check one):  
 For foreign entity, address and telephone number of principal office: [ X ] 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:  
 Advertising  
 Phone: ( )  
 Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):  
 65 Warren Avenue  
 East Providence, RI 02914  
 Phone: (401) 751-7270

**THE NAMES OF THE OFFICERS ARE:**

OFFICER	STREET ADDRESS	CITY/STATE	ZIP CODE
PRESIDENT	Frederick Lusignan, 65 Warren Avenue, East Providence, RI 02914		
VICE PRESIDENT	Charles Lusignan, 65 Warren Avenue, East Providence, RI 02914		
SECRETARY	Frederick Lusignan		
TREASURER	Frederick Lusignan		

**THE NAMES OF THE DIRECTORS ARE:**

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
Frederick Lusignan			
Charles Lusignan			

NUMBER OF SHARES AUTHORIZED (Rider may be attached)		NUMBER OF SHARES ISSUED AND OUTSTANDING (Rider may be attached)	
Number of Shares	Class / Series	Number of Shares	Class / Series
1000	Common	200	Common
NO PAR VALUE		NO PAR VALUE	

Date: 4.10.95 19 95  
 By: *Frederick Lusignan*  
 PRINT OR TYPE NAME OF OFFICER SIGNING  
 TITLE OF OFFICER SIGNING

**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

ANDREW M GILSTEIN  
 155 SOUTH MAIN ST.  
 PROVIDENCE RI 02908

APR 11 1995  
 185906#7921

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  
I.L.C. Sept. 1 - Nov. 1  
CORP. Jan. 1 - March 1

Corporate ID: 0038763 Annual Report for the year: 1994

Name of Business Entity: COMMUNICATION ARTS GROUP, INC.

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

Federal Taxpayer Identification Number: [REDACTED]

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)

One Richmond Square  
Providence, RI 02906

Phone: (401) 521-2510

Business Entity is (check one)

- Business Corporation (See RIGL Chapter 7-1.1)
- Professional Service Corporation (See RIGL Chapter 7-5.1)
- Limited Liability Company (See RIGL 7-16)

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

Andrew M. Gilstein, Esq.  
Armstrong, Gibbons

155 South Main Street

Providence, RI 02903

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

Date of Organization: 12/12/85

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

THE NAMES OF THE OFFICERS ARE:

OFFICE	NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
<input checked="" type="checkbox"/> CHIEF EXECUTIVE OFFICER OR <input checked="" type="checkbox"/> PRESIDENT (Include)	Frederick Lusignan	65 Warren Avenue, East Providence	RI	02914
<input type="checkbox"/> CHIEF OPERATING OFFICER OR <input checked="" type="checkbox"/> VICE-PRESIDENT (Include)	Charles Lusignan	65 Warren Avenue, East Providence	RI	02914
<input type="checkbox"/> CUSTODIAN OF RECORDS OR <input checked="" type="checkbox"/> SECRETARY (Include)	Frederick Lusignan			
<input type="checkbox"/> CHIEF FINANCIAL OFFICER OR <input checked="" type="checkbox"/> TREASURER (Include)	Frederick Lusignan			

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
Frederick Lusignan			
Charles Lusignan			

NUMBER OF SHARES AUTHORIZED (If Applicable)		NUMBER OF SHARES ISSUED AND OUTSTANDING (If Applicable)	
NUMBER	1,000	NUMBER	200
CLASS	Common	CLASS	Common
SERIES		SERIES	
PAR VALUE OR WITHOUT PAR	No Par	PAR VALUE OR WITHOUT PAR	No Par

Date: 3-3-94 19

By: [Signature]  
PRINT OR TYPE NAME OF OFFICER SIGNING: Frederick Lusignan  
TITLE OF OFFICER SIGNING: Pres.

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 10 (I.C. Corp.) must be filed

FILED

MAR 7 1994

By: [Signature]

7212

ANDREW M. GILSTEIN  
155 SOUTH MAIN ST.  
PROVIDENCE RI 02903

# State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION  
100 NORTH MAIN STREET  
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0036783 Annual Report for the year 1993

FIRST: The name of the corporation is COMMUNICATION ARTS GROUP, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is Advertising

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island One Richmond Square, Providence, RI 02906

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

Name	Office	Address (including number, street, zip code)
Frederick Lusignan	Director	<del>One Richmond Square, Providence, RI</del> <u>65 Waveren Ave, F. Prov. RI</u>
Charles Lusignan	Director	<del>One Richmond Square, Providence, RI</del>
	Director	
Frederick Lusignan	President	<del>One Richmond Square, Providence, RI</del>
Charles Lusignan	Vice President	<del>One Richmond Square, Providence, RI</del>
Frederick Lusignan	Secretary	<del>One Richmond Square, Providence, RI</del>
Frederick Lusignan	Treasurer	<del>One Richmond Square, Providence, RI</del>

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
1,000.00	Common		No Par

EIGHTH: Number of Shares issued:

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

*Filed & Filed NOV 29 1993  
Check 7031  
gob*

Dated 11-22-93 19

Communication Arts Group, Inc.  
(Name of Corporation)

By [Signature]  
Title Pres

(Report must be signed by an officer)

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

6/10/92

Corporate ID 0036753 Annual Report for the year 1992

FIRST: The name of the corporation is COMMUNICATION ARTS GROUP, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is Design

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

FIFTH: Business address in Rhode Island One Richmond Sq.  
Providence R.I. 02906

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

Name	Office	Address (including number, street, zip code)
<u>Fred Dusingan</u>	<u>Director</u>	<u>30 Anthony Rd., Foster, R.I. 02825</u>
<u>Charles Dusingan</u>	<u>Director</u>	<u>33 Anthony Rd., Foster, R.I. 02825</u>
	<u>Director</u>	
<u>Fred Dusingan</u>	<u>President</u>	
<u>Charles Dusingan</u>	<u>Vice President</u>	
<u>Fred Dusingan</u>	<u>Secretary</u>	
<u>Fred Dusingan</u>	<u>Treasurer</u>	

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
<u>1000</u>	<u>Common</u>		<u>NO PAR</u>

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
<u>300</u>	<u>Common</u>		<u>NO PAR</u>

PAID

JUN 20 1992

COMMERCIAL

Dated 4-7-92 19

Communication Arts Group Inc.  
(Name of Corporation)

By [Signature]  
Title Pres.

(Report must be signed by an officer)

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

6011

Corporate ID 0036763 Annual Report for the year 1991

FIRST: The name of the corporation is COMMUNICATION ARTS GROUP, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is Passign

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island One Richmond Sp.  
Provi. R.I. 02906

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

Name	Office	Address (including number, street, zip code)
<u>Fred Lusignan</u>	<u>Director</u>	<u>30 Anthony Rd., Foster, R.I. 02825</u>
<u>Charles Lusignan</u>	<u>Director</u>	<u>33 Anthony Rd., Foster, R.I. 02825</u>
	<u>Director</u>	
<u>Fred Lusignan</u>	<u>President</u>	
<u>Charles Lusignan</u>	<u>Vice President</u>	
<u>Fred Lusignan</u>	<u>Secretary</u>	
<u>Fred Lusignan</u>	<u>Treasurer</u>	

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
<u>1000</u>	<u>Common</u>		<u>NO PAR</u>

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
<u>300</u>	<u>Common</u>		<u>NO PAR</u>

PAID

JUN 28 1992

CLERK OF STATE

Dated 4-7-92 19

Communication Arts Group, Inc.  
(Name of Corporation)

By [Signature]  
Title Pres.

(Report must be signed by an officer)

Filing Fee \$15.00

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

# State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION  
100 NORTH MAIN STREET  
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 36763 Annual Report for the year 1990

FIRST: The name of the corporation is COMMUNICATION ARTS GROUP, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is Advertising

FOURTH: If foreign corporation, address of its principal office N/A

FIFTH: Business address in Rhode Island One Richmond Square, Providence, RI 02906

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

Name	Office	Address (including number, street, zip code)
Charles Lusignan	Director	One Richmond Square, Providence, RI 02906
Frederick Lusignan	Director	" " " " " "
	Director	
Frederick Lusignan	President	One Richmond Square, Providence, RI 02906
Charles Lusignan	Vice President	" " " " " "
Frederick Lusignan	Secretary	" " " " " "
Frederick Lusignan	Treasurer	" " " " " "

SEVENTH: Number of Shares authorized:

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

EIGHTH: Number of Shares issued:

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

PAID

DEC 3 - 1990

FOR OFFICE

Dated Nov. 19, 1990

COMMUNICATION ARTS GROUP, INC.  
(Name of Corporation)

By President

(Report must be signed by an officer)

Filing Fee \$15.00

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

# State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION  
100 NORTH MAIN STREET  
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0036763 Annual Report for the year 1989

FIRST: The name of the corporation is COMMUNICATION ARTS GROUP, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is Advertising

FOURTH: If foreign corporation, address of its principal office N/A

FIFTH: Business address in Rhode Island One Richmond Square, Providence, RI 02906

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

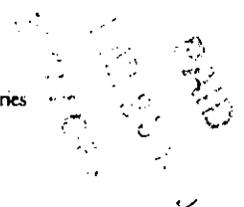
Name	Office	Address (including number, street, zip code)
Arthur Bentley	Director	One Richmond Sq., Providence, RI 02906
Charles Lusignan	Director	" " " " " "
Fred Lusignan	Director	" " " " " "
Arthur Bentley	President	
Charles Lusignan	Vice President	
Fred Lusignan	Secretary	
Fred Lusignan	Treasurer	

SEVENTH: Number of Shares authorized:

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

EIGHTH: Number of Shares issued:

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



Dated 19 89

COMMUNICATION ARTS GROUP, INC.  
(Name of Corporation)

By

Title Sec

(Report must be signed by an officer)

Filing Fee \$15.00

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

# State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION  
270 WESTMINSTER MALL  
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 36763 Annual Report for the year 1988

FIRST: The name of the corporation is COMMUNICATION ARTS GROUP, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is Advertising

FOURTH: If foreign corporation, address of its principal office N/A

FIFTH: Business address in Rhode Island One Richmond Square, Providence, RI 02906

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

Name	Office	Address (including number, street, zip code)
Arthur Bentley,	Director	One Richmond Sq., Providence, RI 02906
Charles Lusignan,	Director	" " " " " "
Fred Lusignan,	Director	" " " " " "
Arthur Bentley,	President	
Charles Lusignan,	Vice President	
Fred Lusignan,	Secretary	
Fred Lusignan,	Treasurer	

SEVENTH: Number of Shares authorized:

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

EIGHTH: Number of Shares issued:

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

**PAID**  
APR 7 1988  
**SECY. OF STATE**  
Series

Dated 19 88 COMMUNICATION ARTS GROUP, INC.  
(Name of Corporation)

By Arthur H. Bentley  
Title President

(Report must be signed by an officer)

# State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION  
270 WESTMINSTER MALL  
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 36763 Annual Report for the year 1987

FIRST: The name of the corporation is COMMUNICATION ARTS GROUP, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is Advertising

FOURTH: If foreign corporation, address of its principal office N/A

FIFTH: Business address in Rhode Island One Richmond Square, Providence, RI 02906

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

Name	Office	Address (including number, street, zip code)
Arthur Bentley	Director	One Richmond Sq., Providence, RI 02906
Charles Lusignan	Director	" " " " " "
Fred Lusignan	Director	" " " " " "
Arthur Bentley	President	
Charles Lusignan	Vice President	
Fred Lusignan	Secretary	
Fred Lusignan	Treasurer	

SEVENTH: Number of Shares authorized:

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

EIGHTH: Number of Shares issued:

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

PAID

1987

SECY OF STATE

Dated 2-19-87

COMMUNICATION ARTS GROUP, INC.  
(Name of Corporation)

By Arthur H. Bentley

Title President

(Report must be signed by an officer)

MAY 11 1987

# State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION  
270 WESTMINSTER MALL  
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 36763 Annual Report for the year 1986

FIRST: The name of the corporation is COMMUNICATION ARTS GROUP, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is Advertising

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

FIFTH: Business address in Rhode Island One Richmond Square, Providence, RI  
02906

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

Name	Office	Address (including number, street, zip code)
Arthur Bentley	Director	One Richmond Square, Providence, RI 02906
	Director	
	Director	
Arthur Bentley	President	One Richmond Square, Providence, RI 02906
" "	Vice President	" " " " "
" "	Secretary	" " " " "
" "	Treasurer	" " " " "

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
1,000	Common		No par

EIGHTH: Number of Shares issued:

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

Dated February 1986 Communication Arts Group, Inc.

By Arthur Bentley  
Title President

(Report must be signed by an officer)

MAR 23 1986

03/11/86 PAID 01684001



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

**Matthew A. Brown**  
*Secretary of State*

August 19, 2003

COMMUNICATION ARTS GROUP, INC.  
c/o ANDREW M. GILSTEIN, ESQ.  
155 SOUTH MAIN STREET  
PROVIDENCE, RI 02903

RE: Corporation ID # 36763  
COMMUNICATION ARTS GROUP, INC.

Dear Sir or Madam:

The Corporations Division of the Office of the Secretary of State has yet to receive your Annual Report for the year 2003.

Pursuant to the provisions set forth in Section(s), 7-6-56, 7-6-85, 7-1.1-87, and 7-1.1-114 of the General Laws of the State of Rhode Island, the Certificate of Incorporation/Authority of the above named entity will be revoked after 60 days from the date of this notice for failure to file the report.

Please file your 2003 Annual Report with the Corporations Division within the next sixty days so that your authority to conduct business will remain intact. If you have any questions, or if we can be of any assistance, please do not hesitate to call the Corporations Division at (401) 222-3040.

Sincerely,

Matthew Brown  
Secretary of State