



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)

1. Corporate ID No 88268		2. Name of Corporation THOMAS STREET STUDIOS, LTD.			
3. Street Address Principal Business Office 823 Park Ave			City Cranston	State RI	Zip 02910-2037
4. Business Phone No. 401-780-0550		5. State of Incorporation RHODE ISLAND			6. SIC Code 257
7. Brief Description of the Character of Business Conducted in Rhode Island TO ENGAGE IN THE BUSINESS OR MURAL PAINTING; ARTISTIC PAINTING.					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Harley Bartlett			Vice President Name Same		
Street Address 44 LaFAYETTE St			Street Address Same		
City Pawtucket	State RI	Zip 02860	City Same	State Same	Zip Same
Secretary Name Same			Treasurer Name Same		
Street Address			Street Address		
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 Harley Bartlett			Director Name		
Street Address 44 Lafayette St.			Street Address		
City Pawtucket	State RI	Zip 02860	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
1,000 COMM NO PAR VALUE			100	Common Stock	No Par

RECEIVED
SECRETARY OF STATE
CORPORATIONS DIV
05 MAR 16 AM 11:46

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



File Date	3/16/05
Check No.	2206
By:	WB
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 **Harley W. Bartlett** Date
Presid.
Print or Type Name of Officer
Harley W. Bartlett
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 2005

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 88268		2. Name of Corporation THOMAS STREET STUDIO, LTD			
3. Street Address Principal Business Office 823 PARK AVE		City CRANSTON		State RI	Zip 002910-2037
4. Business Phone No. 401-780-0550		5. State of Incorporation R.I.			6. SIC Code 257
7. Brief Description of the Character of Business Conducted in Rhode Island TO ENGAGE IN THE BUSINESS OF MURAL PAINTING, ARTISTIC PAINTING					
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name HARLEY BARTLETT			Vice President Name SAME		
Street Address 44 LAFAYETTE ST			Street Address SAME		
City PAWTUCKET	State RI	Zip 02860	City	State	Zip
Secretary Name			Treasurer Name		
Street Address			Street Address		
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 HARLEY BARTLETT			Director Name		
Street Address 44 LAFAYETTE ST			Street Address		
City PAWTUCKET	State RI	Zip 02860	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
1,000	COMMON STOCK	NO PAR	100	COMMON STOCK	NO PAR

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

FILED	
File Date	MAR 02 2005 2188
Check No.	
By: <u>Harley Bartlett</u>	
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.

Harley Bartlett 3/1/05
Signature of Officer Date
HARLEY BARTLETT
Print or Type Name of Officer
PRES.
Title of Officer



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Matthew A. Brown, Secretary of State

Corporation
100 North Main Street
Providence, RI 02903-1335
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

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

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No 88268		2. Name of Corporation THOMAS STREET STUDIOS, LTD.			
3. Street Address Principal Business Office 823 Park Ave			City Cranston	State RI	Zip 02910-2037
4. Business Phone No. 401-780-0550		5. State of Incorporation RHODE ISLAND			6. SIC Code 257
7. Brief Description of the Character of Business Conducted in Rhode Island TO ENGAGE IN THE BUSINESS OR MURAL PAINTING, ARTISTIC PAINTING.					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Harley Bartlett			Vice President Name Same		
Street Address 44 Lafayette St			Street Address Same		
City Pawtucket	State RI	Zip 02860	City	State	Zip
Secretary Name Same			Treasurer Name Same		
Street Address			Street Address		
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 Harley Bartlett			Director Name		
Street Address 44 Lafayette St.			Street Address		
City Pawtucket	State RI	Zip 02860	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
1,000 COMM NO PAR VALUE			100	Common Stock	No Par

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



* 8 8 2 6 8 *

File Date	3-2-04
Check No.	1896
By:	HP
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.

Harley W. Bartlett 3-1-04
Signature of Officer Date
HARLEY W. BARTLETT
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 02903-1335
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 PRINTED IN BLACK)

1. Corporate ID No. 88268	2. Name of Corporation THOMAS STREET STUDIOS, LTD.	City CRANSTON	State RI	Zip 02910-2037
3. Street Address Principal Business Office 823 PARK AVE	4. Business Phone No. 401-780-0550	5. State of Incorporation RHODE ISLAND	6. SIC Code 257	
7. Brief Description of the Character of Business Conducted in Rhode Island COMMERCIAL ART STUDIO				

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

President Name HARLEY BARTLETT	Vice President Name SAME
Street Address 44 LAFAYETTE ST	Street Address
City PAWTUCKET	City
State RI	State
Zip 02860	Zip
Secretary Name SAME	Treasurer Name SAME
Street Address	Street Address
City	City
State	State
Zip	Zip

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

Director Name HARLEY BARTLETT	Director Name
Street Address 44 LAFAYETTE ST	Street Address
City PAWTUCKET	City
State RI	State
Zip 02860	Zip
Director Name	Director Name
Street Address	Street Address
City	City
State	State
Zip	Zip

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

AUTHORIZED SHARES	Class/Series	Par Value
1,000 COMM NO PAR VALUE		

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

ISSUED SHARES	Class/Series	Par Value
100	COMMON	NO PAR

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



* 8 8 2 6 8 *

File Date: 4-3-03

Check No.: 1596

By: 2

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 Harley Bartlett Date 4-1-03

Print or Type Name of Officer Harley Bartlett

Title of Officer PRES.



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 02903-1335
401-222-3040



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. **88268** 2. Name of Corporation **THOMAS STREET STUDIOS, LTD.**
3. Street Address Principal Business Office **163 EXCHANGE ST** City **PAWUCKET** State **RJ** Zip **02860**
4. Business Phone No. **401-724-3300** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **257**

7. Brief Description of the Character of Business Conducted in Rhode Island
DECORATIVE + MURAL PAINTING

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

President Name HARLEY BARRETT	Vice President Name SAME
Street Address 44 LAFAYETTE ST	Street Address
City PAWUCKET State RJ Zip 02860	City State Zip
Secretary Name SAME	Treasurer Name SAME
Street Address	Street Address
City State Zip	City State Zip

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

Director Name	Director Name
Street Address	Street Address
City State Zip	City State Zip
Director Name	Director Name
Street Address	Street Address
City State Zip	City State Zip

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

AUTHORIZED SHARES	Class/Series	Par Value
1,000 COMM NO PAR VALUE		

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

ISSUED SHARES	Class/Series	Par Value
100	Common NO PAR	

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



* 8 8 2 6 8 *

File Date: **4-17-02**
1197
Check No.:
By: **2**

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 **Harley W. Barrett** Date **4/14/02**
Print or Type Name of Officer
PRES.
Title of Officer





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

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



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. 88268		2. Name of Corporation THOMAS STREET STUDIOS, LTD.			
3. Street Address Principal Business Office 163 Exchange Street		City Pawtucket	State RI		
4. Business Phone No. 401-724-3300		5. State of Incorporation RHODE ISLAND	6. SIC Code 257		
7. Brief Description of the Character of Business Conducted in Rhode Island Mural and Decorative Painting					
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Harley W. Bartlett		Vice President Name SAME			
Street Address 44 Lafayette Street		Street Address			
City Pawtucket	State RI	City	State		
Zip 02860		Zip			
Secretary Name SAME		Treasurer Name SAME			
Street Address		Street Address			
City	State	City	State		
Zip		Zip			
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name		Director Name			
Street Address		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) <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 SHS COMM NO PAR VAL			100	Comm	NO PAR VAL

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



* 8 8 2 6 8 *

4-18-01

File Date

3791

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.

Jayla B. B. **2/28/01**
Signature of Officer Date

Harley W. Bartlett
Print or Type Name of Officer

President
Title of Officer



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 02903-1333
401-222-3041



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. 88268		2. Name of Corporation THOMAS STREET STUDIOS, LTD.	
3. Street Address Principal Business Office 163 Exchange Street		City Providence	State RI
4. Business Phone No. 401 724 3300		5. State of Incorporation RHODE ISLAND	
6. SIC Code 257		7. Brief Description of the Character of Business Conducted in Rhode Island Decorative and Mural Painting	
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name Harley W. Bartlett		Vice President Name SAME	
Street Address 44 Lafayette Street		Street Address	
City Providence	State RI	City	State
Zip 02860		Zip	
Secretary Name SAME		Treasurer Name SAME	
Street Address		Street Address	
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 Harley W. Bartlett		Director Name NA	
Street Address 44 Lafayette Street		Street Address	
City Providence	State RI	City	State
Zip 02860		Zip	
Director Name NA		Director Name NA	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)		11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)	
AUTHORIZED SHARES		ISSUED SHARES	
Number of Shares	Class/Series	Number of Shares	Class/Series
1,000 SHS COMM NO PAR VAL		100	Comm
Par Value		Par Value	
		No Par Value	

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



* 8 8 2 6 8 *

File Date: **1/12/00**

Check No.: **2667**

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.

Harley W. Bartlett 10 Jan 00
Signature of Officer Date

Harley W. Bartlett
Print or Type Name of Officer

President
Title of Officer



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
401-222-3046

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. 88268		2. Name of Corporation THOMAS STREET STUDIOS, LTD.			
3. Street Address Principal Business Office 163 Exchange Street		City Pawtucket		State RI	Zip 02860
4. Business Phone No. 4017243300		5. State of Incorporation RHODE ISLAND			6. SIC Code 257
7. Brief Description of the Character of Business Conducted in Rhode Island Decorative and Mural Painting					
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS <input type="checkbox"/>					
President Name Harley W. Bartlett			Vice President Name Terrance L. Brackenbury		
Street Address 44 Lafayette Street			Street Address 433 Morris Avenue		
City Pawtucket	State RI	Zip 02866	City Providence	State RI	Zip 02906
Secretary Name Terrance L. Brackenbury			Treasurer Name Harley W. Bartlett		
Street Address 433 Morris Avenue			Street Address 44 Lafayette Street		
City Providence	State RI	Zip 02906	City Pawtucket	State RI	Zip 02860
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS <input type="checkbox"/>					
Director Name Harley W. Bartlett			Director Name Terrance L. Brackenbury		
Street Address 44 Lafayette Street			Street Address 433 Morris Avenue		
City Pawtucket	State RI	Zip 02866	City Providence	State RI	Zip 02906
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
1,000 SHS COMM NO PAR VAL			100	Comm	No Par Val

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



* 8 8 2 6 8 *

File Date: **Feb 5, 1999**

Check No.: **2051**

By: **ID**

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

Harley W. Bartlett

Print or Type Name of Officer

President

Title of Officer



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
401-277-3040

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. 88268		2. Name of Corporation THOMAS STREET STUDIOS, LTD.	
3. Street Address Principal Business Office 163 Exchange Street		City Providence	State RI
4. Business Phone No. 401 724 3300		5. State of Incorporation RHODE ISLAND	
6. SIC Code 0257		7. Brief Description of the Character of Business Conducted in Rhode Island Mural and Decorative Painting	
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT)			
President Name Harley W. Bartlett		Vice President Name Terry Brackenbury	
Street Address 44 Lafayette Street		Street Address 433 Morris Avenue	
City Providence	State RI	City Providence	State RI
Zip 02906		Zip 02906	
Secretary Name Terry Brackenbury		Treasurer Name Harley W. Bartlett	
Street Address 433 Morris Avenue		Street Address 44 Lafayette Street	
City Providence	State RI	City Providence	State RI
Zip 02906		Zip 02906	
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT)			
Director Name Harley W. Bartlett		Director Name Terry Brackenbury	
Street Address 44 Lafayette Street		Street Address 433 Morris Avenue	
City Providence	State RI	City Providence	State RI
Zip 02906		Zip 02906	
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)			
11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)			
AUTHORIZED SHARES		ISSUED SHARES	
Number of Shares	Class/Series	Number of Shares	Class/Series
1,000 SHS COMM NO PAR VAL		100	
Par Value		Par Value	

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



* 8 8 2 6 8 *

File Date: **3.20.98**
Check No.: **1468**
By: **1UP**

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.

Harley W. Bartlett 18 March 98
Signature of Officer Date
President
Print or Type Name of Officer
Harley W. Bartlett
Title of Officer



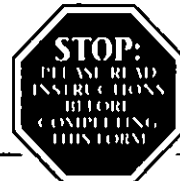
STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

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

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. 88268		2. Name of Corporation THOMAS STREET STUDIOS, LTD.	
3. Street Address Principal Business Office 163 Exchange Street		City Pawtucket	State RI
4. Business Phone No. 401 724 3300		5. State of Incorporation RHODE ISLAND	
6. SIC Code 0257		7. Brief Description of the Character of Business Conducted in Rhode Island Decorative and Mural Painting	
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT)			
President Name Harley Bartlett		Vice President Name Terry Brackenbury	
Street Address 44 Lafayette Street		Street Address 433 Morris Avenue	
City Pawtucket	State RI	City Providence	State RI
Zip 02860		Zip 02906	
Secretary Name Eugene Smith		Treasurer Name Harley Bartlett	
Street Address 163 Exchange Street		Street Address 44 Lafayette Street	
City Pawtucket	State RI	City Pawtucket	State RI
Zip 02860		Zip 02860	
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT)			
Director Name Harley Bartlett		Director Name Terry Brackenbury	
Street Address 44 Lafayette Street		Street Address 433 Morris Avenue	
City Pawtucket	State RI	City Providence	State RI
Zip 02860		Zip 02906	
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
10. SHARES AUTHORIZED AND ISSUED (*X* BOX FOR ATTACHMENT)			
AUTHORIZED SHARES		ISSUED SHARES	
Number of Shares	Class/Series	Number of Shares	Class/Series
1,000 SHS COMM NO PAR VAL		100	Comm
Par Value		Par Value	
		No Par Val	

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



File Date: **8/13/97**

Check No.: **1235**

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] **8/11/97**
Signature of Officer Date

Harley Bartlett
Print or Type Name of Officer

President
Title of Officer