



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)

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1. Corporate ID No <u>95369</u>		2. Name of Corporation <u>Catanzaro & Sons Painting, Inc.</u>			
3. Street Address Principal Business Office <u>145 Royal Avenue</u>			City <u>Cranston</u>	State <u>RI</u>	Zip <u>02920</u>
4. Business Phone No <u>401-942-2126</u>		5. State of Incorporation <u>RI</u>			6. SIC Code
7. Brief Description of the Character of Business Conducted in Rhode Island <u>Painting/wallpaper</u>					
8. NAMES AND ADDRESSES OF THE OFFICERS: (<input checked="" type="checkbox"/> BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name <u>Henry H. Catanzaro</u>			Vice President Name <u>Kelley A. Catanzaro</u>		
Street Address <u>145 Royal Avenue</u>			Street Address <u>S.A.P.T.E</u>		
City <u>Cranston</u>	State <u>RI</u>	Zip <u>02920</u>	City <u>S.A.P.T.E</u>	State <u>RI</u>	Zip
Secretary Name <u>Kelley A. Catanzaro</u>			Treasurer Name <u>Henry H. Catanzaro</u>		
Street Address <u>S.A.P.T.E</u>			Street Address <u>S.A.P.T.E</u>		
City <u>S.A.P.T.E</u>	State <u>RI</u>	Zip	City <u>S.A.P.T.E</u>	State <u>RI</u>	Zip
9. NAMES AND ADDRESSES OF THE DIRECTORS: (<input checked="" type="checkbox"/> BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name <u>None</u>					
Street Address					
City	State	Zip	City	State	Zip
Director Name					
Street Address					
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED (<input checked="" type="checkbox"/> BOX FOR ATTACHMENT) <input type="checkbox"/>					
11. SHARES ISSUED (<input checked="" type="checkbox"/> BOX FOR ATTACHMENT) <input type="checkbox"/>					
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares <u>1000</u>	Class Series <u>no par</u>	Par Value	Number of Shares <u>None</u>	Class Series	Par Value

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

FILED

File Date AUG 22 2005
Check No. By M 75073

FOR SECRETARY OF STATE USE ONLY

MA

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.

Kelley A. Catanzaro 7-20-05
Signature of Officer Date
Kelley A. Catanzaro
Print or Type Name of Officer
V. President
Title of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

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(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. <u>953069</u>		2. Name of Corporation <u>CATANZARO & Son's Painting, Inc.</u>			
3. Street Address Principal Business Office <u>145 Royal Avenue</u>			City <u>Cranston</u>	State <u>RI</u>	Zip <u>02920</u>
4. Business Phone No. <u>401-942-2126</u>		5. State of Incorporation <u>RI</u>		6. SIC Code	
7. Brief Description of the Character of Business Conducted in Rhode Island <u>Painting / wallpaper</u>					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name <u>Henry H. Catanzaro Jr.</u>			Vice President Name <u>Kellee A. Catanzaro</u>		
Street Address <u>145 Royal Avenue</u>			Street Address <u>SAME</u>		
City <u>Cranston</u>	State <u>RI</u>	Zip <u>02920</u>	City <u>SAME</u>	State <u>SAME</u>	Zip <u>SAME</u>
Secretary Name <u>Kellee A. CATANZARO</u>			Treasurer Name <u>Henry H. Catanzaro Jr.</u>		
Street Address <u>SAME</u>			Street Address <u>SAME</u>		
City <u>SAME</u>	State <u>SAME</u>	Zip <u>SAME</u>	City <u>SAME</u>	State <u>SAME</u>	Zip <u>SAME</u>
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name <u>NONE</u>			Director Name <u>NONE</u>		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name <u>NONE</u>			Director Name <u>NONE</u>		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
AUTHORIZED SHARES					
Number of Shares <u>1000</u>	Class/Series <u>NONE</u>	Par Value	Number of Shares	Class/Series	Par Value
11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
ISSUED SHARES					
Number of Shares <u>NONE</u>	Class/Series	Par Value	Number of Shares	Class/Series	Par Value

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

FILED

File Date AUG 22 2005

Check No. By M 75073

By: 62P

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 Kellee A. Catanzaro Date 7-20-05

Print or Type Name of Officer Kellee A. CATANZARO

Title of Officer V. President



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. <u>95309</u>		2. Name of Corporation <u>CATANZARO & Sons INC.</u>			
3. Street Address Principal Business Office <u>145 Royal Avenue</u>			City <u>Cranston</u>	State <u>RI</u>	Zip <u>02900</u>
4. Business Phone No. <u>401-942-2126</u>		5. State of Incorporation <u>RI</u>			6. SIC Code
7. Brief Description of the Character of Business Conducted in Rhode Island <u>Paint / wallpaper</u>					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name <u>Henry H. Catanzaro JR.</u>			Vice President Name <u>Kellee A. CATANZARO</u>		
Street Address <u>145 Royal Avenue</u>			Street Address <u>SAME</u>		
City <u>Cranston</u>	State <u>RI</u>	Zip <u>02900</u>	City <u>SAME</u>	State <u>RI</u>	Zip <u>02900</u>
Secretary Name <u>Kellee A. CATANZARO</u>			Treasurer Name <u>Henry H. Catanzaro Jr</u>		
Street Address <u>SAME</u>			Street Address <u>SAME</u>		
City <u>SAME</u>	State <u>RI</u>	Zip <u>02900</u>	City <u>SAME</u>	State <u>RI</u>	Zip <u>02900</u>
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name <u>NONE</u>			Director Name <u>NONE</u>		
Street Address <u>NONE</u>			Street Address <u>NONE</u>		
City <u>NONE</u>	State <u>RI</u>	Zip <u>02900</u>	City <u>NONE</u>	State <u>RI</u>	Zip <u>02900</u>
Director Name <u>NONE</u>			Director Name <u>NONE</u>		
Street Address <u>NONE</u>			Street Address <u>NONE</u>		
City <u>NONE</u>	State <u>RI</u>	Zip <u>02900</u>	City <u>NONE</u>	State <u>RI</u>	Zip <u>02900</u>
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 <u>1000</u>	Class Series <u>no par</u>	Par Value <u>no par</u>	Number of Shares <u>NONE</u>	Class Series	Par Value

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

FILED

File Date AUG 22 2005

Check No By M75073

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 7-20-05
 Print or Type Name of Officer Kellee A. CATANZARO
 Title of Officer V. President



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. **95369** 2 Name of Corporation **Catanzaro & Sons Painting, Inc.**
3 Street Address Principal Business Office **145 Royal Avenue** City **Cranston** State **RI** Zip _____
4 Business Phone No. _____ 5 State of Incorporation **RHODE ISLAND** 6 SIC Code **0**

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

Painting Contractor

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

President Name Henry Catanzaro, Jr. Street Address 145 Royal Avenue City State Zip Cranston RI	Vice President Name Kellee A. Catanzaro Street Address 145 Royal Avenue City State Zip Cranston RI
Secretary Name Kellee A. Catanzaro Street Address 145 Royal Avenue City State Zip Cranston RI	Treasurer Name Henry Catanzaro, Jr. Street Address 145 Royal Avenue City State Zip Cranston RI

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

Director Name None Street Address None City State Zip None None None	Director Name None Street Address None City State Zip None None None
Director Name None Street Address None City State Zip None None None	Director Name None Street Address None City State Zip None None None

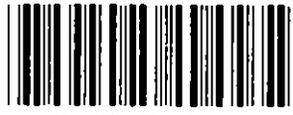
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

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
None None None

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



* 9 5 3 6 9 *

File Date 2-13-02
Check No. 1080
By: [Signature]

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 2-5-02
Henry Catanzaro, Jr.
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. **95369** 2. Name of Corporation **Catanzaro & Sons Painting, Inc.**
3. Street Address Principal Business Office **115 Hamilton Street** City **Cumberland** State **RI** Zip **02864**
4. Business Phone No. **401-334-0842** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **0**

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

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

President Name Henry Catanzaro, Jr.	Vice President Name Kellee A. Catanzaro
Street Address 115 Hamilton Street	Street Address 115 Hamilton Street
City State Zip Cumberland RI 02864	City State Zip Cumberland RI 02864
Secretary Name Kellee A. Catanzaro	Treasurer Name Henry Catanzaro, Jr.
Street Address 115 Hamilton Street	Street Address 115 Hamilton Street
City State Zip Cumberland RI 02864	City State Zip Cumberland RI 02864

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

Director Name None	Director Name None
Street Address None	Street Address None
City State Zip None None None	City State Zip None None None
Director Name None	Director Name None
Street Address None	Street Address None
City State Zip None None None	City State Zip None None None

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
None None None

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



* 9 5 3 6 9 *

File Date: 9-25-01

Check No.: 1016

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: 1-29-01

Print or Type Name of Officer: Henry Catanzaro, Jr.

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. **95369** 2. Name of Corporation **Catanzaro & Sons Painting, Inc.**
3. Street Address Principal Business Office **115 Hamilton Street** City **Cumberland** State **RI** Zip **02864**
4. Business Phone No. **401-334-0842** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code
7. Brief Description of the Character of Business Conducted in Rhode Island

Painting Contractor

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

President Name Henry Catanzaro, Jr. Street Address 115 Hamilton Street City Cumberland State RI Zip 02864	Vice President Name Kellee A. Catanzaro Street Address 115 Hamilton Street City Cumberland State RI Zip 02864
Secretary Name Kellee A. Catanzaro Street Address 115 Hamilton Street City Cumberland State RI Zip 02864	Treasurer Name Henry Catanzaro, Jr. Street Address 115 Hamilton Street City Cumberland State RI Zip 02864

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

Director Name None Street Address None City None State None Zip None	Director Name None Street Address None City None State None Zip None
Director Name None Street Address None City None State None Zip None	Director Name None Street Address None City None State None Zip None

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

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

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

ISSUED SHARES	Class/Series	Par Value
None	None	None

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



* 9 5 3 6 9 *

File Date 1/16/00

Check No. 2050

By [Signature]

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 1-5-00

Print or Type Name of Officer Henry Catanzaro, Jr.

Title of Officer President



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. **95369** 2. Name of Corporation **Catanzaro & Sons Painting, Inc.**

3. Street Address Principal Business Office **115 Hamilton Street** City **Cumberland** State **RI** Zip **02864**

4. Business Phone No. **401-334-0842** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code

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

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

President Name Henry Catanzaro, Jr.	Vice President Name Kellee A. Catanzaro
Street Address 115 Hamilton Street	Street Address 115 Hamilton Street
City Cumberland State RI Zip 02864	City Cumberland State RI Zip 02864
Secretary Name Kellee A. Catanzaro	Treasurer Name Henry Catanzaro, Jr.
Street Address 115 Hamilton Street	Street Address 115 Hamilton Street
City Cumberland State RI Zip 02864	City Cumberland State RI Zip 02864

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

Director Name None	Director Name None
Street Address None	Street Address None
City None State None Zip None	City None State None Zip None
Director Name None	Director Name None
Street Address None	Street Address None
City None State None Zip None	City None State None Zip None

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
None None None

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



File Date: Feb 10, 99
Check No.: 1761
By: [Signature]

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: 2-9-99
Henry Catanzaro, Jr.
Print or Type Name of Officer
President
Title of Officer



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. **95389** 2. Name of Corporation **Catanzaro & Sons Painting, Inc.**
3. Street Address Principal Business Office
115 Hamilton Street City **Cumberland** State **RI** Zip **02864**
4. Business Phone No. **334-0842** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code

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

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

President Name Henry Catanzaro, Jr. Street Address 115 Hamilton Street City Cumberland State RI Zip 02864	Vice President Name Kellee A. Catanzaro Street Address 115 Hamilton Street City Cumberland State RI Zip 02864
Secretary Name Kellee A. Catanzaro Street Address 115 Hamilton Street City Cumberland State RI Zip 02864	Treasurer Name Henry Catanzaro, Jr. Street Address 115 Hamilton Street City Cumberland State RI Zip 02864

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

Director Name None Street Address None City None State None Zip None	Director Name None Street Address None City None State None Zip None
Director Name None Street Address None City None State None Zip None	Director Name None Street Address None City None State None Zip None

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
None None None

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



File Date: 3.13.98
Check No.: 1542
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: _____
Print or Type Name of Officer: Henry Catanzaro, Jr.
Title of Officer: President