

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

ROLLI CORPORATION ANNUAL REPORT FOR THE YEAR	ROEIT	CORPORATION ANNUAL REPORT FOR THE YEAR	2005
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Filing Period: January 1 - March 1 Flling Fee: \$50.00 (FORM MUST BE TYPED OR PRINTED IN BIACK) 1. Corporate ID No. 2. Name of Corporation 110470 Ronald Paris, Inc. 3 Street Address Principal Business Office State 1177 CENTRAL AVENUE PAWIUCKET RI 02861 4. Business Phone No. 5. State of Incorporation 6. SIG Code (401) 729-1187 RHODE ISLAND 3970 7. Brief Description of the Character of Business Conducted in Rhode Island
TO ENGAGE IN THE SALE OF FURNITURE AND THE REUPHOLSTERY OF FURNITURE. 8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS President Name Vice President Name RONALD PARIS, SR. SCOTT PARIS Sircei Address Street Address 80 WILD ACRES DRIVE 80 WILD ACRES DRIVE City State NORTH ATTLEBORO 02760 NORTH ATTLEBORO ...02760... Secretary Name Treasurer Name RONALD PARIS, JR. RONALD PARIS, SR Street Address Street Address 38 HARMAN AVENUE 80 WILD ACRES DRIVE City Staic 2.10 SEEKONK MA 02771 NORTH ATTLEBORO MA 02760 9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS Director Name RONALD PARIS, SR. Street Address Street Address 80 WILD ACRES DRIVE State Zip NORTH ATTLEBORO MA Director Name Street Address Street Address State City State Zip 10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) AUTHORIZED SHARES ISSUED SHARES Number of Shares Class/Series Par Value Number of Shares Class/Series Par Value 8,000 \$.01 PAR VALUE 8000 01 PAR VALUE \$ 80 PER SHARE 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. - 101 Print or Type Name of Officer FOR SECRETARY OF STATE USE ONLY Title of Officer



Office of the Secretary of State Matthew A. Brown, Secretary of State

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. 2. Name of Corporation 110470 Ronald Paris, Inc. 3 Street Address Principal Business Office State 1177 CENTRAL AVE PAWIUCKET RI 028614. Business Phone No 5 State of Incorporation 6 SIC Code (401) 729-1187 RHODE ISLAND 3970 7. Brief Description of the Character of Business Conducted in Rhode Isla TO ENGAGE IN THE SALE OF FURNITURE AND THE REUPHOLSTERY OF FURNITURE. 8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS President Name Vice President Name RONALD PARIS, SR. SCOTT PARIS Street Address Street Address 80 WILD ACRES DRIVE 80 WILD ACRES DRIVE State City Zip NORTH ATTLEBORO... NORTH ATTLEBORO 1....02760... J.. 02.760. . Secretary Name Treasurer Name RONALD PARIS, JR. RONALD PARIS, SR. Street Address Street Address 38 HARMAN AVE 80 WILD ACRES DRIVE State State Zip SEEKONK | MA | 02771 : NORTH 9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) EBORO MA 02760
FILL IN SPACES BEFORE USING ATTACHMENTS Director Name RONALD PARIS, SR. Street Address Street Address 80 WILD ACRES DRIVE City *7.*(p City State 02771 NORTH ATTLEBORO MA Director Name Director Name Street Address Street Address City ZIP State ZIP 10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) **AUTHORIZED SHARES** ISSUED SHARES Number of Shares Class/Series Par Value Number of Shares Class/Series Par Value 8,000 \$.01 PAR VALUE 8000 .01 PAR VALUE \$80 PER SHARE This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee Under penalty of projury, I declace 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 Signature of Officer Print or Type Name of Officer FOR SECRETARY OF STATE USE ONLY Title of Officer

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

2003 PROFIT CORPORATION ANNUAL REPORT FOR THE VEAD

Filing Period: January 1	-March 1 • Fil	ing Fee: \$50.00	OKI FOR THE	EAR	(SEASURIA) (NS) RUCTIO:
(FORM MUST BE TYPED OR PRINTED 1. Corporate ID No.	O IN BLACK) 2. Name of Corporation				
110470	Ronald Paris, Inc	c .			
3. Street Address Principal Business Of			City	State	Zip
1177 Central Ave	9	5. State of Incorporation	Pawtucket	RI	02861 6 SIC Code
(401) 729-1187 ⁷ Brief Description of the Character of	Business Conducted in Rho	RHODE ISLAND			3970
Furniture Store 8. NAMES AND ADDRESSE President Name	ES OF THE OFFICER	RS ("X" BOX FOR ATTACH)	MENT) FILL IN SPACES BEFO	ORE USING ATTACHMI	ENTS
Ronald Paris, Si Street Address	· •		Scott Paris Street Address		
80 Wild Acres Dr	State	Zıp	80 Wild Acres Dr	C State	Zip
North Attleboro Secretary Nume	MA	02760	North Attleboro	MA	02760
Ronald Paris, Jr	£.		Ronald Paris, Si	c.	
38 Harman Ave	State	Zip	80 Wild Acres Dr	C State	Zip
Seekonk 9. NAMES AND ADDRESSE Director Name	MA S OF THE DIRECTO	02771 ORS ("X" BOX FOR ATTAC	North Attleboro HMENT) FILL IN SPACES BE Director Name	MA FORE USING ATTACH!	02760 ments
Ronald Paris, Si	£.		Street Address		
80 Wild Acres Dr	State	Zip	City	State	Zip .
North Attleboro	MA	02771	Director Name		
Street Address			Street Address		
City	State	Zıp	City	State	Zip
10. SHARES AUTHORIZED AUTHORIZED SHARES	(*X* BOX FOR ATTACH»	(ENT)	11. SHARES ISSUED ("X" BO	OX FOR ATTACHMENT)	
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
8,000 \$.01 PAR VALUE			8000	.01 Par Value Per Share	\$80

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

	* 1 1 0 4 7 0 *
File Date:	2/20/03
Check No.:	2823
By:	<u> </u>
FOR SECRETARY O	F STATE USE ONLY

Under penalty of perjury. I declare and affirm	
this report including any accompanying sched that all statements contained herein are true a	
(_ / =)	2.18.03
Signatur of Officer	Date
Print at Type Name of Officer	
1 18° dul	
Title of Officer	Form 630 12/02

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 1002 Filing Period: January 1-March 1 • Filing Fee: \$50.00



(2000)	••••				
(FORM MUST BE TYPED IN BLAC					
1. Corporate ID No	2. Name of Corporatio				
110470	RONALD PA	RIS, INC.			
3. Street Address Principal Business C	office		City	State	. Zip
1177 CENTRAL AVE			PAWTUCKET	RI	02861
4. Business Phone No.		5. State of Incorporation			6. SIC Code
(401) 729–1187		RHODE ISLA	ND		3970
7. Brief Description of the Character	of Business Conducted in I	Rhode Island			
FURNITURE STORE					
8. NAMES AND ADDRESS	ES OF THE OFFIC	ERS ("X" BOX FOR ATTAC	CHMENT)		
President Name			Vice President Name		
RONALD PARIS, SR Street Address	•		SCOTT PARIS Street Address		
80 WILD ACRES DR	IVE .		80 WILD ACRES DRI	VE.	
City	State	Zip	City	State	Zip
NORTH ATTLEBORO Secretary Name	MA	02760	NORTH ATTLEBORO	MA	02760
RONALD PARIS, JR.			RONALD PARIS, SR.		
Street Address			Street Address		
38 HARMAN AVE			80 WILD ACRES DRI	3.7tc	
City	State	Ζιρ	City	VE State	Zip
SEEKONK	MA	02771	NORTH ATTLEBORO	ma	02760
9. NAMES AND ADDRESS Director Name	ES OF THE DIREC	TORS (*x* box for at			02700
RONALD PARIS, SR.			2		
Street Address	•		Street Address		
80 WILD ACRES DRI	TVE				
City:	State	Zip	City	State	Zip
NORTH ATTIEBORO	Mλ	02771	,		••
Director Name	PP1	02//1	Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED AUTHORIZED SHARES	("X" BOX FOR ATTAC	CHMENT)	11. SHARES ISSUED (*x* B	OX FOR ATTACHMENT)	
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
8000 SHS PAR VAL	JE .01 PER SH	ARE	8000	.01 PAR VALUE	\$80

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

PER SHARE

	Under penalty of perjury, I declare and affi	rm that I have examined
	20 111 32 7. that att statements confidence herein are true	
FILED	70. 11 32 7 that all statements compained herein are tru	2
Check No.: FEB 2 1 2002	Signature of Officer	Date
By Can Dig 1	QEATE Print or Type Name of Officer	
FOR SECRETARY OF STATE USE ONLY	Title of Officer	

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 T	YPED IN BLAC						
I. Corporate ID No. 11047	0	2 Name of Corpo. Ronald P	ration aris, Inc.				
3. Street Address Prin	cipal Business (Office			City	State	Zip
117 1. Business Phone No		ral Avenu	5. State of	Incorporation E ISLAND	Pawtucket	RI	02861 6. SIC Code
Uphols	Tery +	of Business Conducted FORM TOP ES OF THE OF	c sales	K FOR ATTACHE	MENT) FILL IN SPACES Vice President Name	BEFORE USING ATTA	CHMENTS
Ron	ald J.	Paris:			ece iresident same		
Street Address	ora o.	10113			Street Address		
80	Wild A	cres Road					
lity:	th Att	State	MA	02706	Crty	State	Zip
ecretary Name		•			Treasurer Name		
treet Address					Street Address		
City		State	Zip		City	State	Zip
O. NAMES AND Director Name	ADDRESS	ES OF THE DIF	RECTORS (*X* B	OX FOR ATTAC	HMENT) FILL IN SPACE	ES BEFORE USING AT	ACHMENTS
Ron treet Address	ald J.	Paris			Street Address		
Sam	e	State	Zıp		City	State	Zıp
Director Nume	/				Director Name		
treet Address	1				Street Address		
ity	:	State	Zip		City	State	Zip
O. SHARES AU Uthorized shares	THORIZED	("X" BOX FOR AT	TACHMENT)		11. SHARES ISSUED ("X" BOX FOR ATTACHMEN	(T)
Cumber of Shares		Class/Series	Par Value		Number of Shares	Class/Series	Par Value
8,000 \$.0	1 PAR V	ALUE			8000	com	\$0.01

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

Title of Officer

