

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

Matthew A. Brown, Secretary of State

100 North Juan Succe Providence, RI 02903-1335

401 222 3040 2005

INOTH CONTONATION	A.V.NUAL KEPUKI PUK INE IRAK	2000
Filing Period: January 1 - March I 💍 🔹	Filing Fee: \$50.00	
(FORM MUST BE TYPED OF PRINTED IN BLACK)		

(FORM MUST BE TYPED OR PR	INTED IN BLACK)					
1 (Augmate II) No. 21170	1	PTICAL SHOP, INC.				
8 Street Address Percepal Brisines 205 A	BULLOCKS	POINT AVE	RIVERSIDE	State RI	02915	
Basiness Pione No. 401-437-		5 State of Incorporation RHODE ISLAND			6 SIC Clale 4879	
BUY AND SELL OFFIC	CAL GOODS REI	i Rimaic Island PAIR OF OPTIC	AL GOODS (FR	AMES AND I	LENSES)	
. NAMES AND ADDRESSI	ES OF THE OFFICER	S: ("X" BOX FOR ATTA	CHMENT) [FILL IN SPA	CES BEFORE USING	ATTACHMENTS	
Sesident Name		_	Vice President Name			
ANTHONY	M SANI	tos	: ANTHUNY M	SANTOS		
	IS HILL P.		Street Additions 427 HOPKINS	HILL ROA	D	
COUENTRY	State RI	02816	COVEWTRY	State RL	02816	
DORIS E	SANTUS	5	Trasurer Name ANT40NY Y	n SANTOS		
Street Address 38 LAKES	DE ST		Street Address			
" RIVERSIDE	State RI	^{7#} 02915	427 HOPKIN COUENTRY	State RX	02816	
. NAMES AND ADDRESSI	ES OF THE DIRECTO	RS: ("X" BOX FOR ATT	ACHMENT) 📋 FILL IN SI	PACES BEFORE USING	G ATTACHMENTS	
NONE			Director Name NONE			
ineet Address			Street Address			
Dη	State	Zip	City	State	Zψ	
Ju ector Nang			Director Name			
NONE			NONE			
street Address			Street Address			
in:	State	Zip	Сиу	State	Ζφ	
IO. SHARES AUTHORIZEI AUTHORIZED SHARES) ("X" BOX FOR AT	TACHMENT)	11. SHARES ISSUED ("X" ISSUED SHARES	 " BOX FOR ATTACH&	MENT)	
Number of Shares	Class wives	Pen Value	Number of Shares	Glass/Senes	Par Value	
1,000 COMM NO PAR VA	LUE		1000	Comm	NO PAR VALUE	
This report must be	e signed in ink by eit	her the President, Vice Pi	resident, Secretary, Assistant S	Secretary, Treasurer, R	eceiver or Trustee	
i 186	 					



2.28.05
File Date
Check No (0373
Bv
FOR SECRETARY OF STATE USE ONLY

Inder penalty of perjury, I declare and affirm that I have examined this report.
ncluding any accompanying schedules and statements, and that all statements
ontained herein are true and correct

ANTHINY M
Print or Type Name of Officer



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

Matthew A. Brown, Secretary of State

Corporations Division 106 North Main Street Providence, RI 02903-1335 401-222 3640

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR ____ 200 +

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

	<u>-</u>				
1. Corporate ID No.	2 Name of Corpor		51 -		
21170	KIVER-	ide GolieAL	Shop Inc.	T .	
3 Street Address Françapat Busin 205 Bullock	~ ~ ~	,	RIVER-SIDE	State	02915
4 Business Phone No		5 State of Incorporation			5 SIC Code
461-437-1	298	KhoDE	ISLAND		4879
	icter of Business Conducted		/	. : :	,
Buy & Je	11 UpTICAL	- GOODS AND	Any other Lea	AL DUSING	222
8. NAMES AND ADDRES	SES OF THE OFFICE	ERS: ("X" BOX FOR ATT		PACES BEFORE USING	G ATTACHMENTS
President Name ArThony	4. SANTOS		Vice President Name	M. SAATOS	
Street Address			Street Address	11 11 0	
	ins Hill 1	\mathcal{O}_{i}	427 Hopki	AS FIII NO	· · · · · · · · · · · · · · · · · · ·
CovenTRY	State R.I.	Zip 02816	Car CovenTRY	State RI	02816
Secretary Name DORIS E	SONTAS		Treasurer Name	Saats	
Street & ddens			Street Address	DAMINOS	
38 LAKE	side ST		38 LAKE.S	ide ST.	
Car Ristered	side ST	2.p 02915	Cay Ridoreside	State RT	12915
9. NAMES AND ADDRES	SES OF THE DIREC	TORS: ("X" BOX FOR A	TTACHMENT) FILL IN	SPACES BEFORE USI	NG ATTACHMENTS
Director Nama			Director Name		
HAThony	M. SANT	2 5	Mon	e	<u>.</u>
Street Address ,		l Ro	Street Address		
City 1) -	Kins Hill	Zip	City	State	Zip
COVENTRY	'] <i>KZ</i>	12816			
Director Name	SANTAS		Director Name Har	<i>C</i>	
Street Address		•	Street Address		
38 LAKE.	side ST.				
Car Rilegid	State OT	2.19 R 2 G 1 S	Cuy	State	Zip
10. SHARES AUTHORIZ	ED ("X" BOX FOR	ATTACHMENT)	11. SHARES ISSUED (*	 X" BOX FOR ATTACI	HMENT)
AUTHORIZED SHARES	20 (11 2011 ()1		ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
				10	110
1,000-5HS	No PAR C	om.	1,000 SHS	Comm	HOTAR
This report must	the signed in ink by	either the President Vice	President, Secretary, Assistan	it Secretary, Treasurer	Receiver or Trustee
This report musi	too signed in line by	entirer tile Freshdeitt. Vice	Tresment, occidently, russismis	it occidently, frommeron	
			L'ader penalty of peri	ury I declare and affirm	that I have examined this report
					atements, and that all statemen
	-		contained herein are t		
File Date	$(.)9_{-}$		Chris	WTW DE	J-66-1 estra
	£070		Signature of Officer	0 /	Date
Check No.	J7/7		Antain	YM. SATTOS	
			Print or Type Name of	y 1 1 - 0 7 11 10 5 Officer	<u> </u>
$By: - \bigcup_{V} A_{V} = A_{V}$				- <i>n</i>	
FOR SECRETARY C	DE STATE USE ONLY		Title of Officer	17/	
L			ние ој Ојјисет		Form 630 Rev. 12/03

21170

3. Street Address Principal Business Office

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

Zip

State

2003

401-222-3040

4879	
;	
02816	
916	

12/02

PROFIT CO	RPORATION	ANNUAL REPOR	I FOR THE	YEAR]	2003
Filing Period: Jani	uary 1-March 1 •	Filing Fee: \$50.00			
GORM MUST BE TYPED OR	PRINTED IN BLACK)				
1. Corporate ID No.	2. Name of Corporal	tion			

RIVERSIDE OPTICAL SHOP, INC.



205 S BUILOCKS 4. Rusiness Phone No.	S POINT AVEN	UE 5. State of Incorporation	RIVE	RSIDE	RI	02915 6. MC Gode
401-437-1298 7 Brief Description of the Character	of Business Conducted in .	RHODE ISLAND				4879
Selling and re	pair of opt	ical goods(fra	ames a	and lenses).	•	
8. NAMES AND ADDRES				TLL IN SPACES BEF		CHMENTS
Anthony M. Sa	intos		Vice Presid	^{tent Name} Anthony №.	. Santos	
427 Hopkins H	Mill Road		Street Add	‴427 Hopkir	ns Hill Ro	ad
Coventry	State RI	^{z_{ip}} 02816	City	Covertry	State RI	02816
Secretary Name			Treasurer !	Name		
Anthony M. Sa Street Address 427 Hopkins			Street Add			د ـ
-	Hill Road	_		42? Hopkin		
Coventry	State RI	^{Zip} 02816	City	Coventry	State RI	^{Ζιρ} 02816
9. NAMES AND ADDRES	SES OF THE DIREC	TORS ("X" BOX FOR ATTA	CHMENT) Director N	FILL IN SPACES BI		-
Street Address			Street Add	ress		
City	State	Ζιρ	City		State	Zìp
Director Name			Director N	iame		
Street Address			Street Add	ress		
City	State	Zip	City		State	Zip
10. SHARES AUTHORIZE AUTHORIZED SHARES	D ("X" BOX FOR ATTAC	CHMENT)	II. SHA	ARES ISSUED ("X" B	OX FOR ATTACHMEN	NT)
Number of Shares	Glass/Series	Par Value	Number of	f Shares	Class/Series	Par Value
1,000 COMM NO PAR VAI	LUE		10	0	COMM	No Par Value

City

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

	* 2 1 1 7 0 *
File Date _	<u> </u>
Check No.: .	<u> </u>
By: FOR SECRET	TARY 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.

Curthauf M Signature of Officer	Date Date	1-30-02
Signature of Officer	Date	

ANTHONY 1
Print or Type Name of Officer

PRESIDENT	
Title of Officer	
15 S	Form 630

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

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR _

Hing	Period:	January 1	l-March i	•	Filing .	ree:	3 50.00

1. Corporate ID No

2 Name of Corporation

21170

RIVERSIDE OPTICAL SHOP, INC.

3. Street Address Principal Business Office

205 A BULLOCKS POINT AVENUE

RIVERSIDE

02915

4 Business Phone No

5. State of Incorporation

6 SIC Code 4879

401-437-1298

RHODE ISLAND

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

BUY AND SELL CPTICAL GOODS AND ANY OTHER LEGAL EUSINESS

8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) President Name

FILL IN SPACES BEFORE USING ATTACHMENTS

Vice President Name

ANTHONY M. SANTOS

Hopkins Hill Road

Coventry

02816

Street Address

427 Hopkins Hill Road

ANTHONY M. SANTOS

Coventry

RI

^{7:p} 02816

5: retary Name

ANTHONY M. SANTOS

Street Address

Street Address

427 Hopkins Hill Road

Coventry

RI

02816

Street Address

Director Name

Street Address

Treasurer Nome

427 Hopkins Hill Road

ANTHONY M. SANTOS

02816

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

FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

NONE Street Address

Director Name

NONE

Street Address

City

Cate

State

State

City

State

Coventry

Director Name

NONE

NONE

Street Address

City

State

Zip

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

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

11. SHARES ISSUED (*x* box for attachment) ISSUED SHARES

Class/Series

Par Value

NO PAR

1,000 COMM NO PAR VALUE

Number of Shares

1000 SHS

COMM.

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



FOR SECRETARY OF STALL 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

ANTHONY W. SANTCS Print or Type Name of Officer

PRESIDENT

fille of Officer -÷ >> S

Lorm 639 1291

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

CONDRA NATIONS	ar mornen	TAL BUILDING	

1. Corporate ID No.

2. Name of Corporation

21170

RIVERSIDE OPTICAL SHOP, INC.

3. Street Address Principal Business Office

205 A BULLOCKS POINT AVENUE

RIVERSIDE

RI

4. Business Phone No.

401-437-1298

5 State of Incorporation RHODE ISLAND

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

BUY AND SELL OFTICAL GOODS AND ANY OTHER LEGAL BUSINESS

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

President Name

ANTHONY M. SANTOS

Vice President Name

ANTHONY M. SANTCS

Street Address

Street Address

427 Hopkins Hill Road

427 Hopkins Hill Road City

Coventry

RI

02816

Coventry

State R I

02816

Secretary Name

Street Address

City

City

City

ANTHONY M. SANTOS

Treasurer Name

ANTHONY M. SANTOS

427 Hopkins Hill Road State

Coventry

RI

02816

Coventry

RI

427 Hopkins Hill Road

02816

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

Director Name NONE

Ducctor Name

NONE

Street Address

Zip

Street Address

Street Address

City

NONE

1000 SHS NO PAR COM

FOR SECRETARY OF STATE USE ONLY

City

State

 $Z \cdot p$

Director Name

Director Name Street Address

NONE

Street Address

Lip

City

State

 Z_{1P}

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

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

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

ISSUED SHARES

Number of Shares

Class/Series

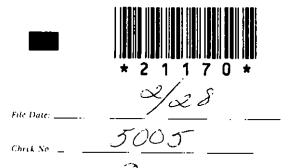
Par Value

1000 SHS

COMM

MC PAR

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



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

Title of Officer

James R. Langevin, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000 Filing Period: January 1-March 1 • Filing Fee: \$50.00

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(FORM MUST BE TYPED IN BLACK)

1. Corporate II. 21°170	2RIVERSIDE	ÖPTICAL SHOP, 1	INC.		
3 Street Address Principal Business 205 BULLOCKS	ome POINT AVEN	U E	RIVERSIDI	State E R I	^{zip} 02915
4. Business Phone No. (401)433-129	8	S. State of Incorporation RHODE ISLAN	iD		6 4879°
7. Brief Description of the Characte BUY AND SELI			OTHER LEGAL	BUSINESS	
8. NAMES AND ADDRES President Name ANTHONY M. S		CERS ("X" BOX FOR ATTA	(CHMENT) FILL IN SP Vice President Name	ACES BEFORE USING ATTACH ANTHONY M. SANTOS	
Street Address 427 Hopkins	Hill Road		Street Address	427 Hopkins Hill	Road
Coventry Secretary Name	State R I	02816	City Coventry Treasurer Name	State R I	^{zip} 02816
ANTHONY M. S	SANTOS			ANTHONY M. SANTO	5
Street Address 427 Hopkins	Hill Road		Street Address	427 Hopkins Hill	
Coventry	State R I	^{zip} 02816	Coventry	State R I	^{2ip} 02816
9. NAMES AND ADDRES		CTORS ("X" BOX FOR A	TACHMENT) FILL IN Director Name	SPACES BEFORE USING ATTAC NONE	CHMENTS
ANTHONY M. S	Hill Road		Street Address	NONE	
Coventry	State R I	^{zip} 02816	City	State	Zip
Director Name NONE			Director Name	NONE	
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZE AUTHORIZED SHARES	ED (*x* box for atta	CHMENT)	11. SHARES ISSU	UED ("x" box for attachment)	
Number of Shares 1000 SHS NO PAR	Class/Series	Par Value	Number of Shares	Class/Series	Par Value N∴ DAD
. COO ONO NO PAR	V V I I		1000 SHS	COMM	NO PAR

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



File Date: 2/22/00

Check No. 4/0/03

Ry: ______

FOR SUCRETARY 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 M. Santos.

Print or Type Name of Officer

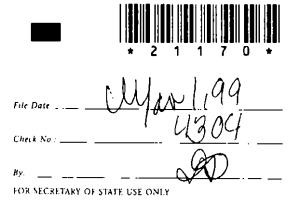
Title of Officer

James R. Langevin, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1999 Filing Period: January 1-March 1 • Filing Fee: \$50.00

GORM MUST BE TYPED IN B	(ACK)				
1 Corporate ID No. 21170	2. Name of Corporation RIVERSIDE C	PTICAL SHOP, INC.			
3. Street Address Principal Busine 205		FCIMT AVE.	RIVERSIDE	State R 1	ziji 02915
4. Business Phone No. (401)43	3-1298	5. State of Incorporation RHODE ISLAND			6 SIC Code 4879
7. Brief Description of the Character (C. P. 1917)	ter of Bysiness Conducted in R L. C. L. L. G. (-(node Island DS AMD AMY CTI	HER IEGAL BUSI	H ESS	
8. NAMES AND ADDRE	ESSES OF THE OFFICE	ERS ("X" BOX FOR ATTACHA		BEFORE USING ATTAC	CHMENTS
ANTIMONY II.	SAMTOS		Vice President Name AP THOPY I S	LANTOS	
Street Address			Street Address		
427 Popkins	Hill Road		427 Mopkins	Hill koad	
City:	State	Zip	City	State	Zip CC On C
Coventry Secretary Name	K1	02816	Noventry Treasurer Name	7.1	02816
ANTHONY :	SANTOS		ANTHONY I S	ANTOS.	
Street Address			Street Address	·	
427 Hopkins	Hill Road		427 Hopkins	Hill Road	
coy Coventry	State } Î	02816	Coventry	State RI	21p 02726
9. NAMES AND ADDRE Director Name ANDHONY 11.		TORS ("X" BOX FOR ATTAC	HMENT) FILL IN SPACE Director Name 2 C.N.I.	ES BEFORE USING ATT.	ACHMENTS
Street Address 427 Hopkins	Hill Road		Street Address		
ow Covertry	State R I	zip 0281€	City	State	Zip
Director Name			Director Name	•	• • •
CMI			NCII.		
Street Address			Street Address		
City	State	Zip	City	State	Zıp
10. SHARES AUTHORIZ AUTHORIZED SHARES	ED ("X" BOX FOR ATTAC.	HMENT)	11. SHARES ISSUED ("X" BOX FOR ATTACHMEN	r)
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1000 SHS NO PAR	COM		1000 000	GCs.	2:00 1 A D

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.

CChi

NO FAR

Ourthon	نب	$ \mathcal{L}^{\mathcal{T}_{\mathcal{L}}} $	Santos Date	8-320
Signature of Officer	_	2 4	Date	
ANTHORY	! .	EANT CL	,	

Print or Type Name of Officer

1000 SHS



2. Name of Corporation

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

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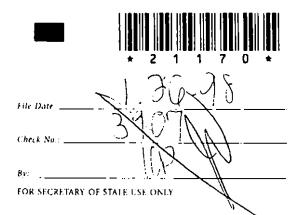
(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.

21170	RIVERSIDE (OPTICAL SHOP, INC.				
Street Address Principal Busine			City	State	_	Zip
205 A Eullo 1. Business Phone No.	ocks Ft Ave	5. State of Incorporation	Riverside	R	1	0291 <u>9</u> 6. SIC Code
401-437-129 Brief Description of the Churac						4879
			er legal busines:	S		
	SSES OF THE OFFIC	CERS (*x* box for attach!				
President Name Anthony W.	Santos		Vice President Name	Sentos		
street Address	Dantos		Anthony M. Street Address	Santos	,	
427 Hopkins	Hill Road	Zip	427 Hopkins	Hill State	Road	Zip
Coventry	RI	02816	Coventry	R	Т	02816
Secretary Name		0-010	Treasurer Name	**	•	02010
Anthony M.	Santos		Anthony M. S	Santos	5	
Street Address			Street Address			
427 Hopkins	Hill Road		427 Hopkins	чііі	Road	
Coventny	State D T	zip 02816	City	State	_	Zip 00014
Coventry	R I		Coventry	R	I	02816
Director Name		CTORS ("X" BOX FOR ATTAC	CHMENT) Director Name			
Anthony M.	Santos		None			
427 Hopkins	Hill Road		Street Address		•	
Coventry	State R I	02816	City	State		Zip
Director Name			Director Name			
None Street Address			None Street Address			
2itv	State	Lip	City	State		Zip
10. SHARES AUTHORIZ	ED ("x" box for atta	CHMENT)	11. SHARES ISSUED ("X" I	BOX FOR AT	TACHMENT)	
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Ser	ies	Par Value

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

1000



1000 SHS NO PAR COM

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.

Common

Signature of Officer Date

Anthony M. Santos

President/Vice Ires/Secretary/Treasur



James R. Langevin, Secretary of State
Corporations Division
North Main Street Providence, N. 02907-3225

100 North Main Street, Providence, RI 02903-1135 401-277-3040

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PROFIT CORPORATION ANNUAL REPORT 1997 Filing Period: Junuary 1-March 1 • Filing Fee: \$50.00

FORM MUST BE TYPED IN BL	ACK)				COMPLET THIS FO
1. Corporate ID No.	2 Name of Corpora	'ion			
21170	RIVERSI	DE OPTICAL SE	HCF, INC.		
3 Speed Address Principal Busines 205 A Bullock	s office S Pt. Ave.		Riverside	State R. I.	02915
4 Business Phone No.		5 State of Incorporation			6 SIC Code
401-437-2398		RHODE IS	SLAND		4879
Euy & Sell op	er of Rusiness Conducted in Otical goods	s and any other	er legal business	3	- 1 7
8. NAMES AND ADDRES	SSES OF THE OFFI	CERS ("X" BOX FOR ATTA	CHMENT)		
^p resident Name - Anthony M. Sa	r.tos		Vice President Name Ant hony M.	Santos	
sueu Addiess 427 Hopkins H	ill Road		sueet Address Hopkins	Hill Road	
cay Coventry	State R. I.	^{za} 02816	Coventry	State R. I.	⁷⁴ 02816
Secretary Name Anthony N. Sa	ntos		Treasurer Name Anthony B	Santos	
Street Address 427 Hopkins H	ill Road		street Address 427 Hopkins	Hill Road	
cay Coventry	State R. I.	^{7ip} 02816	. Coventry	State R. I.	^{Zip} 02816
•			-	1(• 1 •	02010
9. NAMES AND ADDRES Duector Name NONE	22E2 OF THE DIKE	CTORS ("X" BOX FOR AT	TACHMENT) Director Name NONE		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
Cirty	State	Zsp	City	State	Zip
10. SHARES AUTHORIZI	ED AND ISSUED (*	X" BOX FOR ATTACHMENT.			
AUTHORIZED SHARES Number of Shares	Class/Scries	Par Value	ISSUID SHARES Number of Shares	Chara (Carra	One Malan
, , , , , , , , , , , , , , , , , , ,	Chippoten	i ur vunit	Number of Shares	Class/Series	Par Value
1000 SHS NO F	AR COM		1000	Common	

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

	23.97	
ile Date 🔔	<u> </u>	
Theck No :	<u> 3540 </u>	_
	WP/191	
OR SECRETA	RY 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

Extranged Dentis

Anthony M. Santos

Print or Type Name of Office

Title of Officer

PROFIT CORPORATION ANNUAL REPORT

1996



State of Rhode Island and Providence Plantations
James R. Langevin, Secretary of State
Cornorations Division

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 PRI	INT IN BLACK INK.		
1. CORPORATE ID I/IO	2. NAME OF CORPORATION		,		
21170		E OPTICAL SHOP			
3. STREET ADDRESS PRINOPAL BUSINESS OFFIC			ary	STATE	ZIP COOE
3. STREET ADDRESS PRINCIPAL BUSINESS OFFI 205 A. BUSINESS PHONE NO.	Ks FT. Av	C . STATE OF SUCORPORATION	RIVERSILLE	KI	6 SC 000E
437-12		RHODE ISL	AND		4879
7. BROEF DESCRIPTION OF THE CHARACTER OF B	USINESS CONDUCTED IN RHODE ISLAND		1	/ 5	
Puy + Sell	Optical	GOODS & A	ny OTher x	EGAL LUS	iness
PRESIDENT NAME		3 4 10 4 2 0 4 2	MACC PROCESS AND ADDRESS OF THE PARTY OF THE		
STREET ADDRESS THONY		0	STREET ADDRESS	D. SANTO.	٤
CoverTRY	15 HILL K		TO KIVERSIN	SINC ST	ZIP C00E
CovenTRY	KT	02816	KIVERSIA	a Rit	0.2915
STORETARY NAME THOMAS STREET ADDRESS	_		STREET ADDRESS		
38 KAKESI	de ST		427 Hopi	Kins HiLL	RD.
RIVERSIDE	STATE R.T.	02915	427 Hopi COVENTRY SSES OF THE DI	STATE	· 02816
DIRECTOR NAME	9. NAME	S AND ADDRE	BEDECTAR HALL		
STREET ADORESS /.	M. SATTO.		STREET ADDRESS STREET	D. SAR	Tos.
COVENTRY	INS HILL	KD	38 LAKE. RIVERSIDE	side ST.	ze cole
CUVENTRY DIRECTOR NAME	RI	02816	NIVERSIDE DIRECTOR NAME	RI	02915
STREET ADDRESS	/	•	STREET ADDRESS	/	
спч ///	STATE	ZIF C008	опу // С	IN E STATE	2F COGE
	10. SHA	RES AUTHORIA	ZED AND ISSUED		
NUMBER OF SHARES	AUTHORIZED SHARES CLASS/SERIES	PAR VALUE	HUMBER OF SHARES	ISSUED SHARES CLASS / SERIES	PAR VALUE
1000 SHS NO	DAD COM		1	P	
2000 5115 110	THE CON		1000	Cormon	

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: 2/12/94 Check No: 3/70 By: KID W

~

Anthony M. SANTOS
Print or Type Name of Officer

Title of Officer

2/5/96. Date

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

> WILLIAM J. CONLEY, JR. 670 WILLETT AVENUE

EAST PROVIDENCE RI 02915

Corporate ID:

Name of Corporation:

ANNUAL REPORT

Please Type or Print File Annually - Jan. 1 - March 1 Filing Fee \$50.00

Make Checks Payable to: Secretary of State

1995

Annual Report for the year:

FILED

ALL ENTRIES MUST BE COMPLETED IN FULL OR THE FORM WILL BE RETURNED. 0021170

RIVERSIDE OPTICAL SHOP, INC.

Business entity organized under the laws of the State of: R.Z For foreign entity, address and telephone number of principal office:	Business Entity is (check one): [* Business Corporation (See RIGL Chapter 7-1.1) [] Professional Service Corporation (See RIGL Chapter 7-5.1)
Phone: () Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box): 255 A Bullecks A Ave. 125 A Bullecks A Ave. 125 A Bullecks A Ave. 126 A Ave.	Brief statement of the character of business conducted in Rhode Island: OPTICAL GOODS, BUYY SELL OF ANY OTHER LEGAL BUSINESS
Phone: (401) 4-37-1298	
THE NAMES (OF THE OFFICERS ARE:
/i M 1	EET ADDRESS CITYSTATE ZIP CODE
VICE PRESIDENT	HUPKINS HILL OUTENING MA CITY STATE ZIPCODE
SECRETARY SECRETARY STRIP	CHESINE ST RIVERSINE XT 021115 EET ADDRESS CITYSTATE ZIP CODE
P P P P P P P P P P P P P P P P P P P	COUNTY CONTROL OF CONT
TREASURER / STRE	EET ADDRESS CIDY/STATE ZIP CODE
HOTDORY M. TROTOS 427 A	Topking Hill Ro. CoverTrev RIT 02816
THE NAMES O	
	CITY/STATE ZIP CODE
HAThony M. DANTOS 42	7 Hunkins Hill Kn CovenTRY RI 02816
NAME. STRI	HE CADDRESS CIDASTATE TO ZIP CODE
_ HATHERY D. SANTUS 38	LAKESING ST KIVERSING AT 68 02918
NAME STRI	FF : ADDRESS CITY-STATE 2 20 ZIP CODE
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 50 0 50
1000 Common	\mathcal{A} $\stackrel{=}{\sim}$
1700 Common	1000 Common &
······································	
Date	Onlines in lease
Date	1 1 1 2 1 1 1 2 1 1 1 2 1 1 1 1 2 1 1 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	STOR TYPE NAME OF OFFICER SIGNING
Form 31 1:95	JE OF OFFICER SIGNING
DESIGNATED REGISTERED	AGENT FOR SERVICE OF PROCESS:
PLEASE NOTE: If the registered office and/or registered agent indicated	
	Server is meanted, form 7 mag to med.

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

File Annually LLC Sept i Nov I CORP Jan I - March I

100 North Main Street
Providence, Rhode Island 02903-1335
401 277-3040

0021170	1994
Сопрогате ID	Annual Report for the year: FIVERSIDE OPTICAL SHOP: INC.
Name of Business Entity:	FiveRoids of final once into
—	Business Entity is (check one):
Business entity organized under the laws of the State of. AT	Business Corporation (See RIGI, Chapter 7.1.1)
Federal Taxpayer Identification Number	Professional Service Corporation (See RIGI, Chapter 7-5-1)
For foreign entity, address and telephone number of principal office	[] Limited Liability Company (See RIGL 7-16)
<u> </u>	Name, title and mailing address of contact person to whom
<u></u>	Communications may be directed ATThorny M SATTOS - TRes.
	265 Bullicks FT Ave
Phone ()	Riverside RT 02915
Address and telephone of the principal office of business entity in Rhode	
Island (Provide street address Not P.O. Box):	Brief statement of the character of business conducted in Rhode Island
_ 205 Bullocks ft AVE	Uprical Goods ACD Any other
Riverside RT. 02915	LEGAL BUSINESS
_	Date of Organization <u>Oct 5 1977</u>
Phone 401: 437-1298	Date of Qualification to do business in Rhode Island (if foreign entity):
THE NAMES OF	THE OFFICERS ARE:
CHOPPENDUTINE OFFICER OR OF PRASIDENCE SEA OSCI.	ADDRESS CIDISTATE ZIPCODE
THE OPERATING OFFICIAL SET IN NOTIFIED SON TOWN OF STREET	ADDRESS UNDOWNEY KI 028/L
	Keside ST NVERSIDE KIT 02915
CUSTOMAN OF RECERTS OR ST. SECRETARY CONC. STREET.	ADDRESS CICYOTATE ZIPCODE
☐ COLE YNANCIAL FITICER OR ☐ TREASURER (Check Check C	- XODERS - YEARY DE STORGER
HATKERY M. SAATES 427 H	opkins Hill Ko. LevenTRY, 02816
THE NAMES OF T	FHE DIRECTORS ARE: ABBRESS CITY-STATE 7.00000
FINTHERY M SPITIOS 427 H	epkins Hill RD. COVERTRY RT 12816
AnThony D SANTOS 38 L	AKESING ST. KIVERSING RT 02915
NAME STREET	ANORESS CITYSTATE DESCRIPTION
	· · · · · · · · · · · · · · · · ·
NUMBER OF SHARES AUTHORIZED (II Applicable)	NUMBER OF SHARES ISSUED AND OUTSTANDING (If Applicable)
NUMBER /, OTO	NUMBER /, vol
CLASS Common	CLASS Cammon
CLASS C. OMITTER	CEY22 C-6/MILLION
SERIES	SERIES
PAR VALUE OR	PAR VALUE OR
WITHOUT PAR WITHOUT PAR	WITHOUT PAR WITHOUT PAR
Date — Feb 19 1994 By	anthonism Mater
	anthonym bantos.
PRINT G	RING SAME OF DEPLOYER SIGNAL
	PRES.
TITLE O	i O-HCER SALVING
Form 31 - 1:94	
DESIGNATED REGISTERED OR RESI	DENT AGENT FOR SERVICE OF PROCESS:
PLEASE NOTE. If the Corporation has changed its registered office and/or	registered or resident agent. Form 9 or Form LLC 3 must be filed

ANTHONY D. TANTOS 205 SULLOCKS POINT AVENUE PIVERSIDE PI 02915 FEB 25 1994 ME59 2413

State of Rhode Island and Providence Plantations CORPORATIONS DIVISION 100 NORTH MAIN STREET

CORPO 100 NO	id and providence plantations ORATIONS DIVISION ORTH MAIN STREET JE, RHODE ISLAND 02903	,403
Corporate ID 0021170	Annual Report for the year1	993
FIRST: The name of the corporation is	RIVERSIDE OFTICAL SHOP,	INC
Second: It is incorporated under the laws of		
THIRD: Character of business, briefly stated, i	is Buy+ Self Optical	60005
/	s principal office	
FIFTH: Business address in Rhode Island	205 Lullocks PT Ave 1	IVERSIDE B
SIXTH: Names and addresses of its directors a	e Address (including number, street, zip	
Anthony M. Antis Director	<u> </u>	0.
DORIS E. DANTOS Director	38 LAKESINE ST. K.	Verside, K
Director		•••••••••••••••••••••••••••••••••••••••
HAThony M. SANTOS President	t	•••••
DORIS E SANTOS VICE Pres	sident	•••••••••••••••••••••••••••••••••••••••
Secretary		
Hathony M. SANTOS Treasurer	r	*************************************
SEVENTH: Number of Shares authorized:		Par Value atement that
No of Shares Class	share	atement mat is are without par value
1,000 Common	PAID	
Еіднтн: Number of Shares issued:		'ar Value
No of Shares Class Lonmon	SEC'Y OF STATE share	atement that is are without oar value
	,	
Dated <i>Fel</i> 8 1993	Kurrine Theal Ship	Inc.
,	(Name of Corporation)	

(Report must be signed by an officer)

Form 31 1/85

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID	0021170	Annual Report for the year	1992
FIRST: The	name of the corporation is	RIVERSIDE DELICAL :	BHOR, INC.
	is incorporated under the laws of		
THIRD: Cha		Duy + - SELL OFTICAL LEGAL BUSINESS	
FOURTH: If	/	principal office	
Firth: Busin	ness address in Rhode Island 26	5A Bullocks AT AVE Kiverside K	
1	ies and addresses of its directors and	d officers: Address (including number, stre	(Attach rider if necessary)
HAThon Doris L	Y M. SANTOS Director SANTOS Director	53 HALL ST FRO 38 LAKESIDE ST	V KI 0290 Riverside, K
Anthons	Director 1 M SANTOS President		
	E SANTOS Vice Presid	lent	
Anthon	Y M. SanTos Treasurer		
	umber of Shares authorized: 1, ord Class Common	PAID Series EB 1 1 1992	Par Value or statement that shares are without par value
	SEC	CY OF STATE	
EIGHTH: Nu	mber of Shares issued:	Series	Par Value or statement that shares are without par value
Dated	Feb 7, 1992	(Name of Corporation) By White E Santon	ep Inc.
(Report r	nust be signed by an officer)	Title Vice-President	

Form 31 1/85

State of Rhode Island and Providence Plantations CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

Corporate ID	0021170	Annual Report for the year	1991
FIRST: The	name of the corporation is	RIVERSIDE OPTICAL S	HOE, INC
Second: It	is incorporated under the laws of	Rhope Island	
Тнікр: Cha	tracter of business, briefly stated, is	Business	Goors
	, ,	principal office	
Fifth: Busi	ness address in Rhode Island	205 Builocks PT Ave	Riverside KI
4	nes and addresses of its directors a	Address (including number, s	(Attach rider if necessary)
Anthony	E SATIOS Director	55 Hall Street	TROV R.T 0290
Don's	Director	38 LEKESIKE _11.	/ Wekside, BI
Anthor	L SANTES Vice President		
Dors		ident	
	Secretary Treasurer		
Seventh: N	lumber of Shares authorized:	MAR U 1991	Par Value or statement that shares are without
No. of Shares	Cin 2017	SC'Y OF STATE	par value
Еіднтн: Nu	imber of Shares issued:	114/18 74×1991	Par Value or statement that
No of Shares	Class C-i/n/man	SECY OF STATE	shares are without par value
Dated	TF-28 1991	(Name of Corposation)	lop Inc.
/		By Articles	
(Report i	must be signed by an officer)	Title The Freder -	

State of Rhode Island and Providence Plantations CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0021170	Annual Report for the year 1.930
FIRST: The name of the corporation is	RIVERSIDE OFFICAL SHOP, INC.
SECOND: It is incorporated under the laws of	
THIRD: Character of business, briefly stated, is	Buy + Sell OFTICAL GOODS
Hny oth	er Leant Business
FOURTH: If foreign corporation, address of its	principal office
FIFTH: Business address in Rhode Island	105 Bullocks A. Ave Everside RT. 02915
SIXTH: Names and addresses of its directors an	nd officers: (Attach rider if necessary) Address (including number, street, zip code)
Hothery D. SANTES Director	38 LAKESINE ST. RIVERSIDE RT
Doris E. SATTOS Director	-38 LAKESIDE ST. Riverside RI
Director	
HAThony D. SANTAS President	
DORIS E. SANTOS Vice Presidente Doris E. SANTOS Secretary	lent
HAThony D. SAATOS Treasurer	
SEVENTH: Number of Shares authorized:	Par Value or statement that
No. of Shares Class	Shares are without par value
1,00 Common.	PAID
EIGHTH: Number of Shares issued:	FEB 1 4 1990 SEC'Y. OF STATE Par Value or stalement that shares are without
No. of Shares	Series shares are without par value
1, no Common	
Dated 13, 1990	(Name of Corporation) F. J.
(Report must be signed by an officer)	Title The Resident

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0021170	Annual Report fo	r the year 1989
FIRST: The name of the corporation is	RIVERSIDE OFFICA	AL SHOP, INC.
SECOND: It is incorporated under the laws THIRD: Character of business, briefly state OTHER LEGAL	s of Rhope Island ed, is Buy + Sell Op.	
FOURTH: If foreign corporation, address of	f its principal office	
FIFTH: Business address in Rhode Island	205 Bullecks A	Ave Riverside AT
SIXTH: Names and addresses of its directo	Office Address (includ	(Attach rider if necessary) ing number, street, zip code)
Direct		
Anthony D. SANTOS Presid		e ST. Kilenside KT
	President	,, , , , , , , , , , , , , , , , , , ,
DORIS E SANTOS Secret ANTHONY D. SANTOS Treasi		· · · · · · · · · · · · · · · · · · ·
SEVENTH: Number of Shares authorized:		Par Value or statement that
No. of Shares Class	Series	shares are without par value
Eіднтн: Number of Shares issued:	MAR O	Par Value or statement that shares are without
No. of Shares Class Comment	Series *	par value
Dated 3/1/ 19 8 9	(Name of Corporation) By Africe E. S.	I Shop Sue.
(Report must be signed by an officer)	Title Vice Printe	nt

orporate ID. 21170	•	Annual Report for the	e year	<u>1</u> 9
FIRST: The name of the con	poration is	ETVERSIDE DETICAL	SHOP, INC.	
SECOND: It is incorporated	under the laws of	Shed	e letang	•••••
THIRD: Character of busine	ss, briefly stated, is Z	Buy + Sell OFTIC	AL GOODS	
f.	OD ANY OTHER	LEGAL BUSINESS		
		cipal office		
FIFTH: Business address in	Rhode Island 279	ENTILERS PT AVE.		•••••
SIXTH: Names and addresse	es of its directors and of		(Attach rider if necessa umber, street, zip code)	ıry)
	Director			••••
	Director			· • • • • •
	Director		·····	
HATTERY D. SATTE	S President	38 LAKeside S,	T Kiverside, K	
DOKIS E. SANTAS	Vice President	<i>n</i>		,
DORIS E. SANTUS	Secretary	<i>n</i>		
HATnony D. SAMI	Treasurer	// ii	,,	<i>)</i> -
SEVENTH: Number of Share	s authorized:		Par Value	
No. of Shares	_Class	e⊸Serios .~.	or statement that shares are without par value	
1000	ommon	PÄTD	,	
		JAN 27 1988		
EIGHTH: Number of Shares	issued:	SEC'Y, OF STATE	Par Value or statement that	
No of Shares	Slass commen	Series JAN 28	shares are without par value	
ted January 25	19 F.F. (Nar	Survivade Giteril-X	hy be.	
	Ву	How E Sunte	/	••••
(Report must be signed by a	n officer) Title	e flue Trees + Me	<u> </u>	

Rhode Island by + Self Op) Legal Busine coal office Sullocks At 1 ide, R.T. 029	TicAL GOODSY SS Ve
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Legal Busine Bullocks AT 1 ide, KT 029	rs Ive
Sullocks AT 1	<i>9ve</i>
ide, R.T. 029.	
,	
	U
	(Attach rider if necessaring number, street, zip code)
38 LAKESID	e ST RIVERSIDE, A
4	r.
	Par Value or statement that
Series	shares are without par value
	•
)	
•	Par Value
	or statement that
TATE	par value
Turneide Patien	I Show his.
of Corporation)	P. Stellar Francisco
Mars C. Da	nto-
1-1/ // "	hat-
	38 LAKesid

Corporate ID	21170	*******	Annual Report	for the year	1986	******
First:	The name of the corporation is	RIVERSIDE	OPTICAL SHOP	. INC.	•••••••••••••••••••••••••••••••••••••••	•••••
SECOND:	It is incorporated under the la	ws of	Rhode Isla	and		••••••
THIRD:	Character of business, briefly sta AND ANY OTHER					
Fourth:						•
Г ІРТН:	Business address in Rhode Island		ullocks A de R.T. oz			
Ѕіхтн:	Names and addresses of its direct	Office		cluding number, stree	(Attach rider if ned	cessary)
		ector	•••••		••••••••••••	•••••
***************************************		ector	·····	•••••	***************************************	••••••
AnThe			38 LAKESI	de ST.	Riverside	R
Doris	S E SANTOS Vice	e President	4	•••••	······································	029
DoRis	E SANTOS Sec	retary	, , , , , , , , , , , , , , , , , , , ,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, , , , , , , , , , , , , , , , , , ,	<i>,,</i>
AnTh	uny D. JANTOS Tre	asurer	,- * -	<i>مر</i>	2·*	<i>:</i>
Seventh:	: Number of Shares authorized	:			Par Value or statement that shares are without	
No. of Sha ///77	. A)	וֹאַמָּאָרִיע באַרייע	Series	P ,	par value	
Еіднтн:	Number of Shares issued:	OF STAT	APR	5 1986	Par Value or statement that shares are without	
No. of Shar	Common	ATE	Series		par value	
Dated	2/28/ 1986	(Name of C	presside of Corporation of Lang Lang	Sunton	ly low	
Form 31 1/85	port must be signed by an officer)	Title	The I	resident	<u>, </u>	********

Corporate ID 21179		Annual Report for	the year 1985	<u> </u>
FIRST: The name of the	corporation isRIVERSIDE	DOPTICAL SHOP INC	•	······
Second: It is incorporat	ed under the laws of	Rhode Island		
THIRD: Character of bus	iness, briefly stated, is	Buy & Sell L,	DIRAL GOO	PS
	ny other LeGAL			
	oration, address of its princip			
FIFTH: Business address	in Rhode Island 279 /	Bullocks FT. H	ve Kiver	side RT 02915
SIXTH: Names and address	esses of its directors and offic		(Attach	rider if necessary)
······································	Director		•••••	••••••••••
	Director		•••••	
	Director		*******************************	***************************************
Anthony D. Sa.	7/05 President	38 LAKESIDE	ST. RIVERS	de RT 0291
DOKIS E. SAT	Vice President	<i>,</i> ,		
	Secretary			/ ′
HAThony D. Sa	7/0 S Treasurer	*	11	11
SEVENTH: Number of Sh	ares authorized:		Par V	/alue
No. of Shares	Class	Series	or statem shares are par v	without
EIGHTH: Number of Sha	res issued: 03/08/05/06/05	Series	Par V or statem shares are par v	ent that without
Dated 2/12/	PAID 06624001 By	werside Setter (Corporation)	Lagr. S entor	ne-
(Report must be signed I	oy an officer)	Sec	•••••••••••••••••••••••••••••••••••••••	11

State of Rhode Island and Providence Plantations OFFICE OF THE SECRETARY OF STATE

		A	annual Report for t	he year 1983 1984	
FIRST:	The name of the	corporation is	Kileaside L	Mical Shop, Inc	
SECOND:	It is incorpora	ted under the	laws of Rhop	e. Is land	
Third:	Character of bus	siness, briefly s	stated is Bull	Sell Gotter L. God	در
	Ans	oTher Le	CAL BUSINE	2.55	
Fourth:			ress of its princip		
Гігтн :	Business addres	s in Rhode Is	land E. Kiveksid	e, KI 02.915	
SIXTH:	Names and add	resses of its d	irectors and offic	ers:	
	(Addresses must	include street an	d number, if any)		
	iame	Office		Address	
HATKONY	D. Sontus	Director	_38 LAKE SI	de ST RIVERSIDE I	6
Doris L	Santos	Director	38 LAKESIA	de ST Riverside, i de ST Riverside A	4
_		Director			
AnThony	DSontes Zantas	President			
DORIS E	Tantos	Vice Preside	ent		
		Secretary			
(If additional a	space is needed, att	. Treasurer ach rider)			
Seventh	: Number of	Shares author	ized:	Par Value	
No. of Sha	1	Class Commo 17	Series	or statement that shares are without par value	
Еіднтн:	Number of S	hares issued:		Par Value or statement that	
No. of Sha	ares	Class	Series	shares are without par value	
1,600	\mathcal{L}	ommen 3			
	S		0		
Dated:	Mar. 5	198	Spicialel	Steel Stop In	
	ì	\(\frac{1}{2}\)	(Name) of Corputa	tion)	
)	m *,		and the	
. 10	84 7] • • •	Title Much	and by a discount	
MAR 1 4 19			(neport must b	e signed by an officer)	
If the c	orporation has cha	anged its regist	ered office and/or	its registered agent,	
Form #	y must be filed, Ple	ase contact Cisis	oration Division for i	nformation. 277-3040	
		_			

State of Rhode Island and Providence Plantations Office of the secretary of state

	1	Annua	.Report fo	r the <u>y</u> ear	1983	
FIRST: The name of the	e corporation i	is Ti	ienside	Optro	pL Skip	Inc.
SECOND: It is incorpora THIRD: Character of bu	siness, briefly	stated	is Bu		_	CAL
FOURTH: If foreign co						
	i portavion, tra		2 100 prine.	ipui omee		
FIFTH: Business addre						
SIXTH: Names and add	lresses of its o	directo	rs and off	icers:		
(Addresses must	include street ar	nd numb	or, if any)			
Name	Office			Address		
	Director					
	Director					
4	Director				_	
AnThony D. SANTUS	President	_	38 LAKE	eside.	ST. Ruce	side, KI
DORIS E SANTUS	Vice Presid	lent	••	,,	• •	,.
DORIS E. SOUTUS	Secretary			1.	•	••
HAThony D Santas (If additional space is needed, at	Treasurer		"	"	′•	, .
SEVENTH: Number of No. of Shares	Shares author	rized:	Series		Par Value r statement that meres are withou par value	
No. of Shares 1000 Dated: 2/26/	19 \$ -3	S - S C S S S S S S S S S S S S S S S S	······································	ration) reside be signed	Par Value r statement that nares are withou par value	
If the corporation has ch	anged its regist	tered o	ffice and/or	r its registe	ered agent,	l l

FORM 31 (1)-02

Form #9 must be filed. Please contact Corporation Division for information, 277-3040

Filing fee: \$15.00

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

State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

		Annual Report for	the year 1982	
FIRST: The name of	the corporation	is Riverside	OFTICAL Shop. I.	nc.
<u></u>				-
SECOND: It is incorpo	orated under t	he laws of 160	e Island	.,
THIRD: Character of	business, briefl	y stated, is $-B_{ij}$	+ Sell OFTICALO	 1.1.2.5
	They Thek,	Leoph Pisin	<i>ess</i>	
FOURTH: If foreign	corporation, a	ddress of its princ	ipal office	
			orts will be mailed to this	;
address) 279 Delle	Ks FT Also	. Nekside	, KI 02915	
SIXTH: Names and a	ddresses of its	directors and off	icers:	
(Addresses n	nust include street	and number, if any)		
Name	Office	26 /	Address	. /
Matheny D. Soute: Decis E Suntas			Kesido-ST Kingsin	,
Lekis E Dinius	Director	38 LAKE	side ST Kivoeside	K.T.
1 10	Director			
Matheny D. Jonto				÷
Deris E. Fortes	Vice Presid	lent		
	Secretary			
(If additional space is needed, atta	Treasurer (ch rider)			*
SEVENTH: Number o	f Shares autho	orized:	Par Value or statement that	
No. of Shares	Class Crimmen	Series	shares are without par value	
Eigнтн: Number of	Shares issued	l:	Par Value or statement that	
No. of Shures	Class	Series	shares are without par value	
.7			2 3	
Dated: Ann	CF 1952	(Name of Gorporate	Third hop ha	•
FEB	31982	By Voice	Sente	
	Ø/		be signed by an officer)]
If the corporation has	changed its reg	istered office and/or	its registered agent,]

Filing fee: \$15.00

Name

between January 1st and March 1st

State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT

Riverside Optical Shop, Inc.

Pursuant to the provisions of Section 7.1.1-118 of the General Laws, 1956, as amended, the undersigned corporation hereby submits the following annual report:

FIRST: The name of the corporation is Niverside Optical Step Inc. SECOND: It is incorporated under the laws of Khope Island THIRD: The address of its registered office in Rhode Island is 279 Dullocks IT five Niverside, KT 0291 and the name of its registered agent in Rhode Island at such address is Hothory D. Sontos FOURTH: If a foreign corporation, the address of its principal office in the state

or country under the laws of which it is incorporated is

FIFTH: The character of the business in which it is actually engaged in Rhode Island, briefly stated, is Buy + Sell OSTICAL GOODS Phy other Least Business

Sixth: The names and respective addresses of its directors and officers are:

Director Director Director Director Director Director

President Vice President

Secretary Treasurer

SEVENTH: The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Par Value per Share of Statement that Shares are without O Par Value Series Form 31 11 80

EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares

Par Value per Share or Statement that Shares are without Par Value

Dated 2/24/, 198/ Sincered Lating Shop, Sone.

By Some E Santon.

Its Vice Friedom

Filing fee: \$15.00

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

State of Chode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT

ANNUAL REPORT	
OF A	
Sania Copini Shop Sec.	
Pursuant to the provisions of Section 7.11-118 of the General Laws, 1956, as amended, the undersigned corporation hereby submits the following annual report:	
FIRST: The name of the corporation is for wester placed Shipping	
SECOND: It is incorporated under the laws of Winter Bland	
THIRD: The address of its registered office in Rhode Island is 279 Bulli-la-lt.	
and the name of its registered agent in Rhode Island at such address is	
Conting W. Sant	
FOURTH: If a foreign corporation, the address of its principal office in the state or	
country under the laws of which it is incorporated is	
France The character of the horizon in this is a second of the horizon in the second of the second o	
FIFTH: The character of the business in which it is actually engaged in Rhode	
Island, briefly stated, is	
Suf & Sell- Garage Jarage	
any other light lucines	
SIXTH: The names and respective addresses of its directors and officers are:	
Name Office Address	
Director	
Director	
Director	
Director	
Director	
Treston Director President 38 Letterale At Livewill R	_
Afternish Xini President Statistical Amende	ϵ
Your Car Simple Vice President	
Secretary Secretary	
Charles Winder Treasurer	
SEVENTH: The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:	
Par Value per Share or Statement that	
Number of Shares are without Shares Class Series Par Value	
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EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Par Value per Share or Statement that Shares are without Par Value Number of Shares Class Series

By South Santon

Filing fee: \$15.00

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

State of Chode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE ANNUAL REPORT Riverside OFTICAL Shop, Inc Pursuant to the provisions of Section 7.1.1-118 of the General Laws, 1956, as amended, the undersigned corporation hereby submits the following annual report:

FIRST: The name of the corporation is NIVERSIDE (FIRST). SECOND: It is incorporated under the laws of Phone Island THIRD: The address of its registered office in Rhode Island is 279 Bullocks FT. Ave. and the name of its registered agent in Rhode Island at such address is fintheny D. FOURTH: If a foreign corporation, the address of its principal office in the state or country under the laws of which it is incorporated is FIFTH: The character of the business in which it is actually engaged in Rhode Island, briefly stated, is Buy + Sell Optical Goods SIXTH: The names and respective addresses of its directors and officers are: Director Director Director Director Director President 38 Lakeside ST Riverside RI Vice President 38 hakeside ST Riverside RI Secretary 38 Lakeside ST Riverside RI Treasurer 38 Lakeside ST Riverside RI Director RISE SANTOS Thony D. SANTOS SEVENTH: The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is: Par Value per Share or Statement that Shares are without Par Value Shares

Form 31 33M 11-76

EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Series

Par Value per Share or Statement that Shares are without Par Value

Dated Man 1, , 1979 Sweened Street Shape Inc.

By Suctory Il Section

Its Free.

Filing fee: \$15.00

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

State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT

MINORD REPORT
0F
RIVERSIDE CETICAL Shipting.
Pursuant to the provisions of Section 7.1.1-118 of the General Laws, 1956, as amended, the undersigned corporation hereby submits the following annual report: FIRST: The name of the corporation is fivenside Optional Supplies.
SECOND: It is incorporated under the laws of STATE OF RT
THIRD: The address of its registered office in Rhode Island is 2/1/ Delleens 1/ Hile
and the name of its registered agent in Rhode Island at such address is Anthony D.
Son Tax
• • • • • • • • • • • • • • • • • • • •
FOURTH: If a foreign corporation, the address of its principal office in the state or
country under the laws of which it is incorporated is AAAA
en e
FIFTH: The character_of the business in which it is actually engaged in Rhode
Island, briefly stated, is Duy and sell optical Goods
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and the second of the second o
Sixth: The names and respective addresses of its directors and officers are:
Anthony D. Santos Director 38 LAKeside ST Reverside
Deris E Santos Director 38 Lekcside ST Ruenside
Director
Director
Director
Director
Anthony D Santos President 38 Lakeside ST. Kiverside
Digis E Santos Vice President
Denis E Santes Secretary
Hothiny D. Santos Treasurer
SEVENTH: The aggregate number of shares which it has authority to issue, itemized
by classes, par value of shares, shares without par value, and series, if any, within a class, is:
Par Value per Share

or Statement that Shares are without Par Value

Series

Form 31-35M 11-77

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Eighth: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares 110

Series

Par Value per Share or Statement that Shares are without Par Value

Dated 1/29/, 1978 Sprench Specific Stage Inc.

By Since Starts Sec.