



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. 10176		2. Name of Corporation MURRAY'S MOVING & STORAGE, INC.			
3. Street Address Principal Business Office 50 Maria Avenue			City Johnston	State RI	Zip 02919
4. Business Phone No. 273-9440		5. State of Incorporation RHODE ISLAND			6. SIC Code 6650
7. Brief Description of the Character of Business Conducted in Rhode Island MOVING AND STORAGE					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Lois Castro			Vice President Name Lois Castro		
Street Address 88 Byron Ave.			Street Address 88 Byron Ave.		
City Ea. Prov.	State RI	Zip 02915	City Ea. Prov.	State RI	Zip 02915
Secretary Name Lois Castro			Treasurer Name Lois Castro		
Street Address 88 Byron Ave.			Street Address 88 Byron Ave.		
City East Prov.	State RI	Zip 02915	City East Prov.	State RI	Zip 02915
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name NONE			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) <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
600 NO PAR VALUE			200	Common	No Par

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



File Date	2/25/05
Check No.	10267
By	<i>[Signature]</i>
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.

Lois Castro
Signature of Officer

2/16/05
Date

Lois Castro

Print or Type Name of Officer

Secretary

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 2004

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

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 10176		2. Name of Corporation MURRAY'S MOVING & STORAGE, INC.			
3. Street Address Principal Business Office 50 Maria Avenue			City Johnston	State RI	Zip 02919
4. Business Phone No. 273-9440		5. State of Incorporation RHODE ISLAND			6. SIC Code 6650
7. Brief Description of the Character of Business Conducted in Rhode Island MOVING AND STORAGE					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Lois Castro			Vice President Name Lois Castro		
Street Address 88 Byron Avenue			Street Address 88 Byron Avenue		
City Ea. Prov.	State RI	Zip 02916	City Ea. Prov.	State RI	Zip 02916
Secretary Name Lois Castro			Treasurer Name Lois Castro		
Street Address 88 Byron Avenue			Street Address 88 Byron Avenue		
City Ea. Prov.	State RI	Zip 02916	City Ea. Prov.	State RI	Zip 02916
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name NONE.			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) <input type="checkbox"/> AUTHORIZED SHARES			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
600 NO PAR VALUE			200	Common	No Par

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



* 1 0 1 7 6 *

File Date 1-16-04
Check No. 9420
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]
Signature of Officer

Lois Castro

Print or Type Name of Officer

Secretary

Title of Officer

1/13/04
Date



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.

10176

2. Name of Corporation

MURRAY'S MOVING & STORAGE, INC.

3. Street Address Principal Business Office

50 Maria Avenue

City

Johnston

State

RI

Zip

02919

4. Business Phone No.

273-9440

5. State of Incorporation

RHODE ISLAND

6. SIC Code

6650

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

Moving of Household Goods & Storage Facility

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

FILL IN SPACES BEFORE USING ATTACHMENTS

President Name

Lois Castro

Street Address

88 Byron Avenue

City

State

Zip

East Prov.

RI

02915

Secretary Name

Lois Castro

Street Address

88 Byron Avenue

City

State

Zip

East Prov.

RI

02915

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

FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

None.

Street Address

City

State

Zip

Director Name

Street Address

City

State

Zip

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

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

600 NO PAR VALUE

Common

No Par

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

ISSUED SHARES

Number of Shares

Class/Series

Par Value

200

Common

No Par

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



* 1 0 1 7 6 *

File Date

2-26-03

Check No.

8386

By

10P

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

Lois Castro

Signature of Officer

1/24/03

Date

Lois Castro

Print or Type Name of Officer

Secretary

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 2002

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 10176 2. Name of Corporation Murray's Moving & Storage, Inc.
3. Street Address Principal Business Office 50 Maria Avenue City Johnston State RI Zip 02919
4. Business Phone No. 273-9440 5. State of Incorporation Rhode Island 6. SIC Code 6650
7. Brief Description of the Character of Business Conducted in Rhode Island

Moving and storage.

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

President Name	Vice President Name
Lois Castro	Lois Castro
Street Address	Street Address
88 Byron Avenue	
City	City
East Prov.	East Prov.
State	State
RI	RI
Zip	Zip
02915	02915
Secretary Name	Treasurer Name
Lois Castro	Lois Castro
Street Address	Street Address
88 Byron Avenue	88 Byron Avenue
City	City
East Prov.	East Prov.
State	State
RI	RI
Zip	Zip
02915	02915

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

Director Name	Director Name
NONE.	
Street Address	Street Address
City	City
State	State
Zip	Zip
Director Name	Director Name
Street Address	Street Address
City	City
State	State
Zip	Zip

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

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value
600	Common	NO PAR

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

ISSUED SHARES

Number of Shares	Class/Series	Par Value
200	Common	NO PAR

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

File Date: 2/21/02

Check No.: 7517

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

Lois Castro

Print or Type Name of Officer

Secretary

Title of Officer

Date

2/19/02



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. **10176** 2. Name of Corporation **MURRAY'S MOVING & STORAGE, INC.**

3. Street Address Principal Business Office **50 Maria Avenue** City **Johnston** State **R.I.** Zip **06850**

4. Business Phone No. 5. State of Incorporation **RHODE ISLAND**

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

Moving and Storage

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

President Name

Julia Madonna

Street Address

115 Hazelton Street

City **Cranston** State **R.I.** Zip

Secretary Name

Julia Madonna

Street Address

115 Hazelton Street

City **Cranston** State **R.I.** Zip

Vice President Name

Julia Madonna

Street Address

115 Hazelton Street

City **Cranston** State **R.I.** Zip

Treasurer Name

Julia Madonna

Street Address

115 Hazelton Street

City **Cranston** State **R.I.** Zip

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

Director Name

NONE

Street Address

City State Zip

Director Name

Street Address

City State Zip

Director Name

Street Address

City State Zip

Director Name

Street Address

City State Zip

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

AUTHORIZED SHARES

Number of Shares Class/Series Par Value

600 SHS NO PAR VAL

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

ISSUED SHARES

Number of Shares Class/Series Par Value

300

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



* 1 0 1 7 6 *

File Date **2/26**

Check No. **6933**

By **ec**

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 **Julia Madonna** Date **2/22/2002**

Print or Type Name of Officer **Julia Madonna**

Title of Officer **President**



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
401-222-3040



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. **10176** 2. Name of Corporation **MURRAY'S MOVING & STORAGE, INC.**
3. Street Address Principal Business Office **50 Maria Avenue** City **Johnston** State **RI** Zip **02919**
4. Business Phone No. **273-9440** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **6650**
7. Brief Description of the Character of Business Conducted in Rhode Island
moving and storage

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

President Name Julia Madonna	Vice President Name Julia Madonna
Street Address 115 Hazelton Street	Street Address 115 Hazelton Street
City Cranston State RI Zip	City Cranston State RI Zip
Secretary Name Julia Madonna	Treasurer Name Julia Madonna
Street Address 115 Hazelton Street	Street Address 115 Hazelton Street
City Cranston State RI Zip	City Cranston State RI Zip

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

Director Name None	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		
Number of Shares	Class/Series	Par Value
600 SHS NO PAR VAL		

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

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

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



* 1 0 1 7 6 *

File Date: 11/31/00

Check No.: 60284

By CC

FOR SECRETARY OF STATE USE ONLY

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

Julia Madonna 1/28/00
Signature of Officer Date
Julia Madonna

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
401-222-3040



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. 10176		2. Name of Corporation MURRAY'S MOVING & STORAGE, INC.	
3. Street Address Principal Business Office 50 Maria Avenue		City Johnston	State RI
4. Business Phone No. 273-9440		5. State of Incorporation RHODE ISLAND	
6. SIC Code 6850			
7. Brief Description of the Character of Business Conducted in Rhode Island Moving and Storage.			
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name Julia Madonna		Vice President Name Julia Madonna	
Street Address 115 Hazelton Street		Street Address 115 Hazelton Street	
City Cranston	State RI	City Cranston	State RI
Secretary Name Julia Madonna		Treasurer Name Julia Madonna	
Street Address 115 Hazelton Street		Street Address 115 Hazelton Street	
City Cranston	State RI	City Cranston	State RI
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS			
Director Name NONE		Director Name	
Street Address		Street Address	
City	State	City	State
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)			
AUTHORIZED SHARES			
Number of Shares	Class/Series	Par Value	
600 SHS NO PAR VAL	Common		
11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)			
ISSUED SHARES			
Number of Shares	Class/Series	Par Value	
300	Common	No Par	

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



* 1 0 1 7 6 *

File Date: Jan 27, 1999

Check No.: 5722

By: JD

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.

Julia Madonna
Signature of Officer Date

Julia Madonna
Print or Type Name of Officer

Secretary
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. **10176** 2. Name of Corporation **MURRAY'S MOVING & STORAGE, INC.**

3. Street Address Principal Business Office **50 Maria Avenue** City **Johnston** State **RI** Zip _____

4. Business Phone No. **273-9440** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **6850**

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

Moving and Storage

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

President Name **Julia Madonna** Vice President Name **Julia Madonna**

Street Address **115 Hazelton Street** Street Address **115 Hazelton Street**
City **Cranston** State **RI** Zip _____ City **Cranston** State **RI** Zip _____

Secretary Name **Julia Madonna** Treasurer Name **Julia Madonna**

Street Address **115 Hazelton Street** Street Address **115 Hazelton Street**
City **Cranston** State **RI** Zip _____ City **Cranston** State **RI** Zip _____

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

Director Name **NONE** 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
Number of Shares Class/Series Par Value
600 SHS NO PAR VAL Common No Par

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

ISSUED SHARES
Number of Shares Class/Series Par Value
300 Common No Par

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



File Date: **4/6/98**

Check No. **5255**

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.

Julia Madonna
Signature of Officer Date

JULIA MADONNA **4/3/98**

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 1997

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.

10176

2. Name of Corporation

MURRAY'S MOVING & STORAGE, INC.

3. Street Address Principal Business Office

City

State

Zip

50 Maria Avenue

Johnston

RI

02919

4. Business Phone No.

5. State of Incorporation

6. SIC Code

(401) 273-9440

RHODE ISLAND

6650

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

moving and storage

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

President Name

Vice President Name

Julia Madonna

Julia Madonna

Street Address

Street Address

115 Hazelton Street

115 Hazelton Street

City State Zip

City State Zip

Cranston RI

Cranston RI

Secretary Name

Treasurer Name

Julia Madonna

Julia Madonna

Street Address

Street Address

115 Hazelton Street

115 Hazelton Street

City State Zip

Cranston RI

Cranston RI

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

Director Name

Director Name

None

Street Address

Street Address

City State Zip

Director Name

Director Name

Street Address

Street Address

City State Zip

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

AUTHORIZED SHARES

ISSUED SHARES

Number of Shares

Class/Series

Par Value

Number of Shares

Class/Series

Par Value

600 SHS NO PAR VAL

300

COM

NO PAR

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



* 1 0 1 7 6 *

File Date: 3.13.97

Check No.: 7091

By: UP

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: Julia Madonna Date: 3/11/97

Print or Type Name of Officer: JULIA MADONNA Date: 3/11/97

Title of Officer: PRESIDENT

PROFIT CORPORATION ANNUAL REPORT

1996



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

Filing Period: January 1-March 1

Filing Fee: \$50.00

PLEASE TYPE OR PRINT IN BLACK INK.

1. CORPORATE ID NO. 10176		2. NAME OF CORPORATION MURRAY'S MOVING & STORAGE, INC.	
3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE 50 Maria Avenue		CITY Johnston	STATE RI
4. BUSINESS PHONE NO. (401) 273-9440		5. STATE OF INCORPORATION RHODE ISLAND	6. ZIP CODE 02919
7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND Moving and storage			

8. NAMES AND ADDRESSES OF THE OFFICERS		
PRESIDENT NAME Julia Madonna		
VICE PRESIDENT NAME Julia Madonna		
STREET ADDRESS 115 Hazelton Street		
CITY Cranston	STATE RI	ZIP CODE 02910
SECRETARY NAME Julia Madonna		
TREASURER NAME Julia Madonna		
STREET ADDRESS 115 Hazelton Street		
CITY Cranston	STATE RI	ZIP CODE 02910

9. NAMES AND ADDRESSES OF THE DIRECTORS		
DIRECTOR NAME NONE.		
STREET ADDRESS		
CITY	STATE	ZIP CODE
DIRECTOR NAME		
STREET ADDRESS		
CITY	STATE	ZIP CODE
DIRECTOR NAME		
STREET ADDRESS		
CITY	STATE	ZIP CODE

10. SHARES AUTHORIZED AND ISSUED		
AUTHORIZED SHARES		
NUMBER OF SHARES 600 SHS NO PAR VAL	CLASS / SERIES	PAR VALUE
ISSUED SHARES		
NUMBER OF SHARES 300	CLASS / SERIES Common	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

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:

3/1/96

Check No:

6513

By:

CP

For Secretary of State Use Only

Signature of Officer

Julia Madonna
Print or Type Name of Officer

President
Title of Officer

2/29/96

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

ANNUAL REPORT

Please Type or Print

File Annually - Jan. 1 - March 1

Filing Fee \$50.00

Make Checks Payable to: Secretary of State

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

Corporate ID:

0010175

Annual Report for the year:

1995

Name of Corporation:

MURRAY'S MOVING & STORAGE, INC.

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

Business Entity is (check one):

For foreign entity, address and telephone number of principal office:

N/A

☒ Business Corporation (See RIGL Chapter 7-1.1)☐ Professional Service Corporation (See RIGL Chapter 7-5.1)

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

Moving and Storage

Phone: ()

Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):

50 Maria Avenue

Johnston, RI 02919

Phone: (401.) 273-9440

THE NAMES OF THE OFFICERS ARE:

PRESIDENT	STREET ADDRESS	CITY/STATE	ZIP CODE
Julia Madonna	115 Hazelton Street	Cranston, RI	
VICE PRESIDENT	STREET ADDRESS	CITY/STATE	ZIP CODE
Julia Madonna	115 Hazelton Street	Cranston, RI	
SECRETARY	STREET ADDRESS	CITY/STATE	ZIP CODE
Julia Madonna	115 Hazelton Street	Cranston, RI	
TREASURER	STREET ADDRESS	CITY/STATE	ZIP CODE
Julia Madonna	115 Hazelton Street	Cranston, RI	

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
None.			
NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
NAME	STREET ADDRESS	CITY/STATE	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
600	Common Without Par Value

Number of Shares	Class / Series
300	Common Without Par Value

Date January 23, 19 95

MURRAY'S MOVING & STORAGE, INC.

By: Julia Madonna

Julia Madonna

PRINT OR TYPE NAME OF OFFICER SIGNING

President

TITLE OF OFFICER SIGNING

Form 31 1995

DESIGNATED REGISTERED AGENT FOR SERVICE OF PROCESS:

PLEASE NOTE: If the registered office and/or registered agent indicated below is incorrect, Form 9 must be filed.

DOMENIC TUDINO, ESQ
915 SMITH STREET
PROVIDENCE RI 02908

12-11-95
0010175
Julia Madonna
151-5892

Filing Fee \$50.00
Payable to
Secretary of State

PLEASE TYPE or PRINT
State of Rhode Island and Providence Plantations
Office of The Secretary of State
100 North Main Street
Providence, Rhode Island 02903-1335
401-277-3040

File Annually
LLC Sept 1 - Nov. 1
CORP Jan 1 - March 1

Corporate ID: 0010176 Annual Report for the year: 1994

Name of Business Entity: MURRAY'S MOVING & STORAGE, INC.

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

Federal Taxpayer Identification Number: [REDACTED]

For foreign entity, address and telephone number of principal office
N/A

Phone: ()

Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):

50 Maria Avenue

Johnston, RI 02919

Phone: (401) 273-9440

Business Entity is (check one):

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

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

Julia Madonna, President

50 Maria Avenue

Johnston, RI 02919

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

Moving and storage

Date of Organization: 12-28-87

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

N/A

THE NAMES OF THE OFFICERS ARE:

OFFICE	NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
<input checked="" type="checkbox"/> CHIEF EXECUTIVE OFFICER OR <input checked="" type="checkbox"/> PRESIDENT (Check One)	Julia Madonna	115 Hazelton Street,	Cranston, RI	
<input type="checkbox"/> CHIEF OPERATING OFFICER OR <input checked="" type="checkbox"/> VICE PRESIDENT (Check One)	Julia Madonna	115 Hazelton Street,	Cranston, RI	
<input type="checkbox"/> CONTROLLER OF RECORDS OR <input checked="" type="checkbox"/> SECRETARY (Check One)	Julia Madonna	" "	" "	
<input type="checkbox"/> CHIEF FINANCIAL OFFICER OR <input checked="" type="checkbox"/> TREASURER (Check One)	Julia Madonna	" "	" "	

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
NOEN.			

NUMBER OF SHARES AUTHORIZED (If Applicable)

NUMBER 600

CLASS Common

SERIES

PAR VALUE OR
WITHOUT PAR Without par value

NUMBER OF SHARES ISSUED AND OUTSTANDING (If Applicable)

NUMBER 300 **FILED**

CLASS Common

SERIES

PAR VALUE OR
WITHOUT PAR Without par value

MAR 02 1994

By 5312 mnc

Date 2-21- 19 94

MURRAY'S MOVING & STORAGE, INC.

By Julia Madonna

Julia Madonna

PRINT OR TYPE NAME OF OFFICER SIGNING

President

TITLE OF OFFICER SIGNING

Form 31 - 1994

DESIGNATED REGISTERED OR RESIDENT AGENT FOR SERVICE OF PROCESS:

PLEASE NOTE: If the Corporation has changed its registered office and/or registered or resident agent, Form 9 or Form LLC 3 must be filed.

DOMENIC TUJINO, ESQ
915 SMITH STREET
PROVIDENCE RI 02908

Filing Fee \$50.00

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

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

4813

Corporate ID 001017E Annual Report for the year 1993

FIRST: The name of the corporation is MURRAY'S MOVING & STORAGE, INC.

SECOND: It is incorporated under the laws of RHODE ISLAND

THIRD: Character of business, briefly stated, is MOVING & STORAGE

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

FIFTH: Business address in Rhode Island 50 MARIA AVENUE, JOHNSTON, RI 02919

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

Name Office Address (including number, street, zip code)

NONE

Director

Director

Director

JULIA MADONNA

President

115 HAZELTON STREET, CRANSTON, RI

JULIA MADONNA

Vice President

"

"

JULIA MADONNA

Secretary

"

"

JULIA MADONNA

Treasurer

"

"

SEVENTH: Number of Shares authorized:

No. of Shares

Class

600

Common

PAID
FEB 22 1993

Par Value
or statement that
shares are without
par value

Without par value

EIGHTH: Number of Shares issued:

No. of Shares

Class

300

Common

Series

Par Value
or statement that
shares are without
par value

Without par value

Dated Feb. 17 1993

MURRAY'S MOVING & STORAGE, INC.

(Name of Corporation)

By Julia Madonna

Title President

(Report must be signed by an officer)

Filing Fee \$50.00

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

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 001017E Annual Report for the year 1992

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

FIFTH: Business address in Rhode Island 50 Maria Ave., Johnston, R. I.

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

Name

Office

Address (including number, street, zip code)

Director

Director

Director

Julia Madonna

President

115 Hazelton St., Cranston, RI

Julia Madonna

Vice President

115 Hazelton St., Cranston, RI

Julia Madonna

Secretary

115 Hazelton St., Cranston, RI

Julia Madonna

Treasurer

115 Hazelton St., Cranston, RI

SEVENTH: Number of Shares authorized:

No. of Shares

Class

Series

600

Common

Par Value
or statement that
shares are without
par value

without
par value

EIGHTH: Number of Shares issued:

No. of Shares

Class

Series

300

Common

Par Value
or statement that
shares are without
par value

without
par value

Dated March 1, 19 92

MURRAY'S MOVING & STORAGE, INC.

(Name of Corporation)

By

Julia Madonna

Title

President

(Report must be signed by an officer)

Filing Fee \$50.00

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

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0010176 *HC* Annual Report for the year 1991

FIRST: The name of the corporation is MURRAY'S MOVING & STORAGE, INC.

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THIRD: Character of business, briefly stated, is moving and storage

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

FIFTH: Business address in Rhode Island 50 Maria Ave., Johnston, R.I.

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

Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
Julia Madonna	President	115 Hazelton St., Cranston, RI
Julia Madonna	Vice President	115 Hazelton St., Cranston, RI
Julia Madonna	Secretary	115 Hazelton St., Cranston, RI
Julia Madonna	Treasurer	115 Hazelton St., Cranston, RI

SEVENTH: Number of Shares authorized:

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

EIGHTH: Number of Shares issued:

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

PAID
MAR 29 1991
SECY OF STATE

Dated March 1, 1991

MURRAY'S MOVING & STORAGE, INC.
(Name of Corporation)

By Julia Madonna
Title President

(Report must be signed by an officer)

Filing Fee \$15.00

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

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0010176 Annual Report for the year 1990

FIRST: The name of the corporation is MURRAY'S MOVING & STORAGE, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is moving and storage

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

FIFTH: Business address in Rhode Island 50 Maria Ave., Johnston, R. I. Suite A

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

Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
Julia Madonna	President	115 Hazelton St., Cranston, RI
Julia Madonna	Vice President	115 Hazelton St., Cranston, RI
Julia Madonna	Secretary	115 Hazelton St., Cranston, RI
Julia Madonna	Treasurer	115 Hazelton St., Cranston, RI

SEVENTH: Number of Shares authorized:

No. of Shares	Class
600	Common

PAID
Series
JUL 21 1990

Par Value
or statement that
shares are without
par value

without
par value

EIGHTH: Number of Shares issued:

No. of Shares	Class
300	Common

Par Value
or statement that
shares are without
par value

without
par value

Dated February 28 19 90

MURRAY'S MOVING & STORAGE, INC.

(Name of Corporation)

By Julia Madonna

Title President

(Report must be signed by an officer)

Filing Fee \$15.00

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

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0010176

Annual Report for the year 1989

AT

FIRST: The name of the corporation is MURRAY'S MOVING & STORAGE, INC.

SECOND: It is incorporated under the laws of RHODE ISLAND

THIRD: Character of business, briefly stated, is MOVING AND STORAGE

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

FIFTH: Business address in Rhode Island 50 MARIA AVENUE, JOHNSTON RI SUITE A

SIXTH: Names and addresses of its directors and officers:

(Attach rider if necessary)

Name

Office

Address (including number, street, zip code)

Director

Director

Director

JULIA MADONNA

President

115 HAZELTON ST., CRANSTON, RI

JULIA MADONNA

Vice President

115 HAZELTON ST., CRANSTON, RI

JULIA MADONNA

Secretary

115 HAZELTON ST., CRANSTON, RI

JULIA MADONNA

Treasurer

115 HAZELTON ST., CRANSTON, RI

SEVENTH: Number of Shares authorized:

No. of Shares

Class

Series

Par Value
or statement that
shares are without
par value

600

COMMON

PAID

JUL 11 1990

WITHOUT PAR VALUE

EIGHTH: Number of Shares issued:

No. of Shares

Class

Series

Par Value
or statement that
shares are without
par value

300

COMMON

WITHOUT PAR VALUE

Dated FEBRUARY 28 19 89

MURRAY'S MOVING & STORAGE, INC.

(Name of Corporation)

By

Julia Madonna

Title

PRESIDENT

(Report must be signed by an officer)

Filing Fee \$15.00

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

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903

gm

Corporate ID..... Annual Report for the year.....1988.....

FIRST: The name of the corporation is.....MURRAY'S MOVING & STORAGE, INC.

SECOND: It is incorporated under the laws of.....Rhode Island.....

THIRD: Character of business, briefly stated, is.....moving and storage.....

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

FIFTH: Business address in Rhode Island.....50 Maria Ave., Johnston, R. I.

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

Name Office Address (including number, street, zip code)

.....	Director
.....	Director
.....	Director
Julia Madonna	President	115 Hazelton St., Cranston, RI
Julia Madonna	Vice President	115 Hazelton St., Cranston, RI
Julia Madonna	Secretary	115 Hazelton St., Cranston, RI
Julia Madonna	Treasurer	115 Hazelton St., Cranston, RI

SEVENTH: Number of Shares authorized:

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

EIGHTH: Number of Shares issued:

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

Dated.....April 20, 1988.....

MURRAY'S MOVING & STORAGE, INC.

(Name of Corporation)

By.....*Julia Madonna*.....

Title.....*President*.....

(Report must be signed by an officer)

Filing Fee \$15.00

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

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0010176

Annual Report for the year 1988

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FIFTH: Business address in Rhode Island 50 Maria Ave., Johnston, R. I.
SUITE A

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

Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
Julia Madonna	President	115 Hazelton St., Cranston, RI
Julia Madonna	Vice President	115 Hazelton St., Cranston, RI
Julia Madonna	Secretary	115 Hazelton St., Cranston, RI
Julia Madonna	Treasurer	115 Hazelton St., Cranston, RI

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

EIGHTH: Number of Shares issued:

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

March 7, 1988 89 MURRAY'S MOVING & STORAGE, INC.

Dated March 7, 1988

(Name of Corporation)

By Julia Madonna

Title President

(Report must be signed by an officer)