

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

Matthew A. Brown, Secretary of State 💉

	מממכ
IMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR $-$	2005
AMILIED LIABILLIY CUMPANY AMNUAL KEPOKI POK I HE YEAK	2000

Filing Period: September 1 - November 1 Filing Fee: \$50.00 (FORM MUST BE TYPED OR PRINTED IN BLACK) 2. Exact name of the limited liability company L. ID No 103176 Route 102 Recycling, LLC 4. Brief description of the character of the business which is actually conducted in Rhode Island 3. State of Formation **REAL ESTATE HOLDING COMPANY** RHODE ISLAND 5 Principal office address State Ζίρ Burrillville RI 2205 Bronco Highway 6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON: Contact Name Contact Title John E. Karbowski Managing Member City Street Address State Zip 2205 Bronco Highway Burrillville RΙ NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE FILL IN SPACES BEFORE USING ATTACHMENTS ("X" BOX FOR ATTACHMENT) ANY MODIFICATIONS TO MANAGERS REQUIRES FILING OF AMENDMENT, R.I.G.L. 7-16-12 (a) (2) / 7-16-52 Manager Name Manager Name John E. Karbowski Street Address Street Address 203 Cross Street City City Zφ State State 02771 Seekonk MA Manager Name Manager Name Street Address Street Address City State Zф State ... 8. RESIDENT AGENT IN RHODE ISLAND . DO NOT ALTER . Changes require filing of Form 642 - R.I.G.L. 7-16-11 Agent Name Address ERIC T. GRANDE, ESQ. Zφ Address City **376 BROADWAY** PROVIDENCE 02909-

This report must be signed in ink by an authorized person pursuant to R.I.G.L. 7-16-66.

File Date	10/4/05 - 103176	
Check No.	15000	
Ву:	c-	
	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.

Significant of Authorized Person

Date

John E. Karbowski, Managing Member

Print or Type Name of Authorized Person



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

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR ______ 2004

Filling Period: Septen	nber 1 - November 1	• Filing Fee: \$50.00		L I LAN	·	
(FORM MUST BE TYPED		3				
1. //2.No. 103176	2. Exact name of the limited Route 102 Recycling,	me of the limited Itability company 2 Recycling, LLC				
3. State of Formation	4. Brief description	of the character of the busine	ss which is actually conducted in Rhule is	land		<u> </u>
RHODE ISLAND	REAL ESTAT	E HOLDING COMPANY				
5. Principal office address			City	State	· · · · · · · · · · · · · · · · · · ·	Zip
2205 Bronco			Burrillville	R	I	·
6. MAJLING ADDRES	SS OF LIMITED LIABIL	ITY COMPANY AND N	AME OR TITLE OF CONTACT PE	RSON:		!
Contact Name			Contact Title			
John E. Karb	owski		Managing Me	mber		
Street Address			City	State		Zip
2205 Bronco	= -		Burrillville	R	I	,
7. NAME AND ADDR	ESS OF EACH MANAGE	er of the limited L	JABILITY COMPANY, IF APPLIC	ABLE	•	
	FILL IN SPA	CES BEFORE USING AT	ITACHMENTS ("X" BOX FOR A	ATTACHMENT	7 🗖	
AN I	MODIFICATIONS TO	MANAGERS REQUIRES	FILING OF AMENDMENT, R.I.G	i.L. 7-16-12 (:	a) (2) / 7-16·	-52
John E. Karbo	owski					
Street Address			Street Address			
203 Cross St	reet	_				
City	State	Ζφ	City	State		Zip
Seekonk	MA	02771				
Manager Name			Manager Name			
Street Address			Sirvei Address			·
City	State	Zip	City	State	-	Zip
	IN RHODE ISLAND - 1	OO NOT ALTER - Chan	: oges require filing of Form 642	1 - R.I.G.L. 7-1	.6-11	
Agent Name		Address				
ERIC T. GRANDE, ESQ	<u>. </u>					
Address			City		Zíp	
376 BROADWAY		PROVIDENCE 02909.		ļ		
	· 			<u> </u>	 	<u> </u>

This report must be signed in ink by an authorized person pursuant to R.I.G.L. 7-16-66.

	_	_	3	_	_	

File Date	10	12	04		
Check No		036			
Ву:	• •	DA			
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.

Signafice of Authorized Acroon 1.

7/91/07 Date

John E. Karbowski, Managing Member

Print or Type Name of Authorized Person



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

2003

401 222 3040

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR _

Filing Period: September 1 - November 1 • Filing Fee: \$50.00

FORM MUST BE TYPI	ED OR PRIN	TED IN BLACK)					
I/IDNo	2 Exact	name of the hanted	habihty company	-	•		
103176	103176 Route 102 Recycling, LLC						
3 State of Formation		4 Brief description	of the character of the business	which is actually conducted in Rhode Isla	und		
RHODE ISLAND		REAL ESTATE	HOLDING COMPANY				
5. Principal office add	7655	•		City	State	Zφ	
2205 Bronco	Highwa	ay .		Burrillville	RI		
6. MAILING ADD	RESS OF L	IMITED LIABIL	ITY COMPANY AND NA	ME OR TITLE OF CONTACT PER	ISON:	•	
Contact Name				Contact Title			
John E. Kar	bowski			Managin	g Member		
Street Address	- 			City	State	$Z\phi$	
2205 Bronco	Highwa	ıy		Burrillville	RI		
Manager same			MANAGERS REQUIRES	TACHMENTS ("X" BOX FOR A FILING OF AMENDMENT, R.I.G. Manager Manager Manager Manager Manager Manager Manager Manager Manager Manager Manager		/ 7-16-52	
Street Address	203 Cr	oss Street		Street Address			
cii; Seekonk		State MA	/φ 02771	Cup	State	Zip	
Manager Name	••••••	······································		Manager Name			
Street Address				Street Address			
Gift		State .	Zφ	City	State	Zψ	
zigent Name		ODE ISLAND	l DO NOT ALTER - Chang	ges require filing of Form 642 Address	- R.I.G.L. 7-16-11	ı	
ERIC T. GRANDE, E	:5U.		· · · · ·	<u> </u>			
sidiress 376 BROADWAY				PROVIDENCE	Ζφ 0 2	909-	

This report must be signed in ink by an authorized person pursuant to R.I.G.L. 7-16-66,

-	* 1 0 3 1 7 6 *
File Date Check No By	* 1 0 3 1 7 6 *

FOR SECRETARY OF STATE USE ONLY

		lare and affirm that I have exam chedules and statements, and tha	•
menda	ing any accompanying sc	enedates and statements, and tha	t an statements
contai	ged herein are true and co	rorrect.	
	In E Sarl	loudi	
Signa	re of Authorized Person	Date	<u> </u>
(/	,		
	<u>John E.</u> Karbo	wski, Managing Memi	ber

Print or Type Name of Authorized Person



Edward S. Inman, 111, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335

10 North Main Street, Providence, Rt 02903-1335 401,222,3040

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR <u>2002</u>

Filing Period: September 1 - November 1 • Filing Fee: \$50.00 (FORM MUST BE TYPED OR PRINTED IN BLACK) I. ID No. 2. Exact name of the limited liability company 103176 Route 102 Recycling, LLC 4. Brief description of the character of the business which is actually conducted in Rhode Island 3. State of Formation **REAL ESTATE HOLDING COMPANY RHODE ISLAND** 5. Principal office address State Zip Burrillville RI 2205 Bronco Highway, 6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON: Contact Name Contact Title John E. Karbowski Managing Member Street Address State City Zip 2205 Bronco Highway Burrillville RI 7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE FILL IN SPACES BEFORE USING ATTACHMENTS ("X" BOX FOR ATTACHMENT. ANY MODIFICATIONS TO MANAGERS REQUIRES FILING OF AMENDMENT. R.I.G.L 7-16-12 (a) (2) / 7-16-52 Manager Name Manager Name John E. Karbowski Street Address · Street Address State State Zip . .02771. . See konk Manager Name Street Address Street Address Zip State 8. RESIDENT AGENT IN RHODE ISLAND -DO NOT ALTER- Changes require filing of Form 642 - R.I.G.L. 7-16-11 Agent Name Address **ERIC T. GRANDE, ESQ.** Address Cin Zip **376 BROADWAY PROVIDENCE** 02909-

This report must be signed in ink by an authorized person pursuant to 7-16-66.



File Date_	11-12-02			
Check No.	1019			
Ву:	· de			
FOR SECRETARY OF STATE USE ONLY				

Under penalty of perjury, I declare and affirm that I have c	kaminea	
this report, including any accompanying schedules and state	ements,	
and that all statements contained herein are true and correct	t.	
		ì
	118	N
IMM (~ Marka sh . /) / dd	103
M. OW.	111	\longrightarrow
Signature of Authorized Person Date	1 4	'
1		
Violen E. Korboreki Managine Monk		
John E. Karbowski, Managing Memb	ær	
Print or Type Name of Authorized Person		

Form 632 Rev 6/02

Filing Fee: \$50.00

To be filed annually between September 1 and November 1



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State Corporations Division 100 North Main Street Providence, Rhode Island 02903-1335 Telephone (401) 222-3040

LIMITED LIABILITY COMPANY

D	ID Number DLLC 103176 Annual Report for the year 2001	
1.	The name of the limited liability company is:	
	Route 102 Recycling, LLC	
2.	2. The address of the principal office of the limited liability company is:	
	2205 Bronco Highway, Burrillville, RI	
3.	3. The state or other jurisdiction under the laws of which it is formed is RHODE ISLAND	
4.	4. The name and address of its resident agent is: ERIC T. GRANDE, ESQ.	
	376 BROADWAY PROVIDENCE RI 02909-	
5.	5. The current mailing address of the limited liability company and the name or title of a person to whom commun	nications
	may be directed are:John E. Karbowski, Managing Member, 2205 Bronco Highway,	
	Burrillville, RI	
6.	6. A brief statement of the character of the business in which the limited liability company is actually engage	d in this
	state: real estate holding company	
7.	7. If the limited liability company has managers, the name and address of each manager of the limited liability co **Name** Address**	mpany
	John E. Karbowski 203 Cross Street, Seekonk, MA 02771	
Da	Dated November 7, 2001 Under penalty of perjury, I declare and affirm that I have examine report, including any accompanying schedules and statement	
	that all statements contained herein are true and correct. Route 102 Recycling, LLC	
	1 0 3 1 7 6 Exact Name of Limited Liability Company	

FOR SECRETARY OF STATE USE ONLY File Date: //- /9-0/

1013 Check No.:

By:

Exact Name of Limited Liability Company

Karbowski, Managing Member

Form No. 632 Revised 01/99

By:

Form No. 632

Revised 01/99



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State Corporations Division 100 North Main Street Providence, Rhode Island 02903-1335 Telephone (401) 222-3040

LIMITED LIABILITY COMPANY

ID	Number DLLC 103176	Annual Report for the year 2000
1.	The name of the limited liability con	npany is:
	Route 102 Recycling, LLC	
2.	The address of the principal office of	of the limited liability company is:
	2205 Bronco Highway, Burr	illville, RI
3.	The state or other jurisdiction under	r the laws of which it is formed is RHODE ISLAND
4.	The name and address of its reside	ntagentis: ERICT. GRANDE, ESQ.
	376 Broadway, Provide	nce, RI 02909
5.	The current mailing address of the I	limited liability company and the name or title of a person to whom communications
	may be directed are: John E. H	Karbowski, Managing Member, 2205 Bronco Highway,
	Burrillville, RI	
6. 7.	state: real estate holds	of the business in which the limited liability company is actually engaged in this ing company nanagers, the name and address of each manager of the limited liability company Address
	John E. Karbowski	203 Cross Street, Seekonk, MA 02771
	September 30, 2000 1 0 3 1 7 6 FOR SECRETARY OF STATE USE ONLY Date: 2/7	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. Route 102 Recycling, LLC Exact Name of Limited Liability Company By Land Land Laborator Company Land Laborator Company
Chec	k No.: 1985	Managing Member Tite
_	Ze.	Form No. 632

Filing Fee: \$50.00

To be filed annually between September 1 and November 1



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State Corporations Division 100 North Main Street Providence, Rhode Island 02903-1335 Telephone (401) 222-3040

LIMITED LIABILITY COMPANY

ID	Number <u>LL 103176</u>	Annual Report for the year 1999)
1.	The name of the limited liability company is:		
	Route 102 Recycling, LLC		
2.	The address of the principal office of the limited liability company is:		
	Bronco Highway, Burrillville, RI		
3.	The state or other jurisdiction under the la	ws of which it is formed is RHODE ISLAND	
4.	he name and address of its resident agent is: ERIC T. GRANDE, ESQ.		
	LAW OFFICE OF DUB & GRANDE, LTD. 415 PAWTUCKET AVENUE PAWTUCKET, RI 02860		
5.	The current mailing address of the limited liability company and the name or title of a person to whom communications		
		bowski, Managing Member, Bronco Highway,	
6. 7.	A brief statement of the character of the business in which the limited liability company is actually engaged in thi state: real estate holding company If the limited liability company has managers, the name and address of each manager of the limited liability company Name Address		
	John E. Karbowski	203 Cross Street, Seekonk, MA	
∩ at	ed September 13, 1999		
Dali	* 1 0 3 1 7 6 *	Under penalty of perjury, I declare and affirm that report, including any accompanying schedules a that all statements contained herein are true and cor Route 102 Recycling, LLC Exact Name of Limited Liability Compan	and statements, and rect.
ile I	FOR SECRETARY OF STATE USE ONLY Date: 0-14/-99 k No.: 1654	John E. Karbowski Managing Member Title	
y:	AMF		Form No. 632 Revised 01/99