



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 2005

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

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 99176		2. Name of Corporation State of the Arts Karate Center, Inc.			
3. Street Address Principal Business Office 1160 Bald Hill Road			City Warwick	State RI	Zip 02886
4. Business Phone No. 401-821-4340		5. State of Incorporation RHODE ISLAND			6. SIC Code 6882
7. Brief Description of the Character of Business Conducted in Rhode Island TO PROVIDE TEACHING, TRAINING AND SKILLS IN THE ART OF SELF DEFENSE TO INDIVIDUALS OF ALL AGES IN VARIOUS DISCIPLINES.					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Dennis P. Molloy			Vice President Name SAME		
Street Address 25 Bennett Street			Street Address		
City Warwick	State RI	Zip 02886	City	State	Zip
Secretary Name SAME			Treasurer Name SAME		
Street Address			Street Address		
City	State	Zip	City	State	Zip
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	\$1.00 PAR VALUE		100	Common	\$1.00

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



FILED

File Date MAR 03 2005
Check No. 165-2562
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] 2-28-05
Signature of Officer Date

Dennis P. Molloy
Print or Type Name of Officer

President
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. 99176		2. Name of Corporation State of the Arts Karate Center, Inc.					
3. Street Address Principal Business Office 1160 Bald Hill Road		City Warwick		State RI		Zip 02886	
4. Business Phone No. 401-821-4340		5. State of Incorporation RHODE ISLAND				6. SIC Code 6882	
7. Brief Description of the Character of Business Conducted in Rhode Island TO PROVIDE TEACHING, TRAINING AND SKILLS IN THE ART OF SELFDEFENSE TO INDIVIDUALS OF ALL AGES IN VARIOUS DISCIPLINES.							
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS							
President Name Dennis P. Molloy				Vice President Name Dennis P. Molloy			
Street Address 25 Bennett Street				Street Address 25 Bennett Street			
City Warwick		State RI		City Warwick		State RI	
Zip 02886		Zip 02886		City Warwick		State RI	
Secretary Name Dennis P. Molloy				Treasurer Name Dennis P. Molloy			
Street Address 25 Bennett Street				Street Address 25 Bennett Street			
City Warwick		State RI		City Warwick		State RI	
Zip 02886		Zip 02886		City Warwick		State RI	
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		City		State	
Zip		Zip		City		State	
Director Name		Director Name		City		State	
Street Address		Street Address		City		State	
City		State		City		State	
Zip		Zip		City		State	
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		Number of Shares		Class/Series	
Par Value		Par Value		Number of Shares		Class/Series	
600 \$1.00 PAR VALUE				100		Common	
						\$1.00	

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



* 9 9 1 7 6 *

File Date 1-26-04
Check No. 2382
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] 1-22-04
Signature of Officer Date

Dennis P. Molloy
Print or Type Name of Officer

President
Title of Officer



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.

2. Name of Corporation

99176

State of the Arts Karate Center, Inc.

3. Street Address Principal Business Office

City

State

Zip

1160 Bald Hill Road

Warwick

RI

02886

4. Business Phone No.

5. State of Incorporation

6. SIC Code

401-821-4340

RHODE ISLAND

6882

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

Karate School & Instructional Center of Self Defense

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

President Name

Vice President Name

Dennis P. Molloy

Dennis P. Molloy

Street Address

Street Address

25 Bennett Street

25 Bennett Street

City

State

Zip

City

State

Zip

Warwick

RI

02886

Warwick

RI

02886

Secretary Name

Treasurer Name

Dennis P. Molloy

Dennis P. Molloy

Street Address

Street Address

25 Bennett Street

25 Bennett Street

City

State

Zip

City

State

Zip

Warwick

RI

02886

Warwick

RI

02886

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

Director Name

Director Name

None

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

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

ISSUED SHARES

Number of Shares

Class/Series

Par Value

Number of Shares

Class/Series

Par Value

600 \$1.00 PAR VALUE

100

Common

\$1.00

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



* 9 9 1 7 6 *

File Date: 2/10/03

Check No.: 2251

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.

X [Signature] 2-6-03
Signature of Officer Date

Dennis P. Molloy
Print or Type Name of Officer

President

Title of Officer

5

Form 630 12/02



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 2002

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.

99176

2. Name of Corporation

State of the Arts Karate Center, Inc.

3. Street Address Principal Business Office

1160 Bald Hill Road

City

Warwick

State

RI

Zip

02886

4. Business Phone No.

401-821-4340

5. State of Incorporation

RHODE ISLAND

6. SIC Code

6882

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

Karate School & Instructional Center

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

FILL IN SPACES BEFORE USING ATTACHMENTS

President Name

Dennis P. Molloy

Vice President Name

Dennis P. Molloy

Street Address

25 Bennett Street

Street Address

25 Bennett Street

City

Warwick

State

RI

Zip

02886

City

Warwick

State

RI

Zip

02886

Secretary Name

Dennis P. Molloy

Treasurer Name

Dennis P. Molloy

Street Address

25 Bennett Street

Street Address

25 Bennett Street

City

Warwick

State

RI

Zip

02886

City

Warwick

State

RI

Zip

02886

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

FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

None

Director Name

None

Street Address

Street Address

City

State

Zip

City

State

Zip

Director Name

None

Director Name

None

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 \$1.00 PAR VALUE

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

ISSUED SHARES

Number of Shares

Class/Series

Par Value

100

Common

\$1.00

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



* 9 9 1 7 6 *

File Date: 2-4-02

Check No.: 2147

By: 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.

Dennis P. Molloy 1-30-02
Signature of Officer Date

Dennis P. Molloy
Print or Type Name of Officer

President
Title of Officer



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. **99176** 2. Name of Corporation **State of the Arts Karate Center, Inc.**
3. Street Address Principal Business Office **1160 Bald Hill Road** City **Warwick** State **RI** Zip **02886**
4. Business Phone No. **401-821-4340** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **6882**

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

Karate School & Instructional Center

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

President Name	Dennis P. Molloy	Vice President Name	Dennis P. Molloy
Street Address	25 Bennett Street	Street Address	25 Bennett Street
City	Warwick	City	Warwick
State	RI	State	RI
Zip	02886	Zip	02886
Secretary Name	Dennis P. Molloy	Treasurer Name	Dennis P. Molloy
Street Address	25 Bennett Street	Street Address	25 Bennett Street
City	Warwick	City	Warwick
State	RI	State	RI
Zip	02886	Zip	02886

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

Director Name	None	Director Name	None
Street Address		Street Address	
City		City	
State		State	
Zip		Zip	
Director Name	None	Director Name	None
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	\$1.00	PAR VALUE

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

ISSUED SHARES

Number of Shares	Class/Series	Par Value
100	Shares	Common
		\$1.00

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



* 9 9 1 7 6 *

File Date: 1/31
Check No.: 2032
By: [Signature]

FOR SECRETARY OF STATE USE ONLY

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

Signature of Officer [Signature] Date
Print or Type Name of Officer Dennis P. Molloy
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.

2. Name of Corporation

99176

State of the Arts Karate Center, Inc.

3. Street Address Principal Business Office

1160 Bald Hill Road

City

Warwick

State

RI

Zip

02886

4. Business Phone No.

401-821-4340

5. State of Incorporation

RHODE ISLAND

6. SIC Code

6882

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

Karate School & Instructional Center

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

FILL IN SPACES BEFORE USING ATTACHMENTS

President Name

Dennis P. Molloy

Vice President Name

Dennis P. Molloy

Street Address

25 Bennett Street

Street Address

25 Bennett Street

City

Warwick

State

RI

Zip

02886

City

Warwick

State

RI

Zip

02886

Secretary Name

Dennis P. Molloy

Treasurer Name

Dennis P. Molloy

Street Address

25 Bennett Street

Street Address

25 Bennett Street

City

Warwick

State

RI

Zip

02886

City

Warwick

State

RI

Zip

02886

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

FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

NONE

Director Name

NONE

Street Address

Street Address

City

State

Zip

City

State

Zip

Director Name

NONE

Director Name

NONE

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 \$1.00 PAR VALUE

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

ISSUED SHARES

Number of Shares

Class/Series

Par Value

100 shares

Common

\$1.00

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



* 9 9 1 7 6 *

File Date: 1-26-00

Check No.: 1914

By: AMF

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: Dennis P. Molloy Date: 1-24, 2000

Print or Type Name of Officer: Dennis P. Molloy

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 1999

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

(FORM MUST BE TYPED IN BLACK)



1. Corporate ID No. 99176		2. Name of Corporation State of the Arts Karate Center, Inc.	
3. Street Address Principal Business Office 1160 Bald Hill Road		City Warwick	State RI
4. Business Phone No. 821-4340		5. State of Incorporation RHODE ISLAND	
6. SIC Code 6882		7. Brief Description of the Character of Business Conducted in Rhode Island Karate School & Instructional Institute	
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name Dennis P. Molloy		Vice President Name Dennis P. Molloy	
Street Address 25 Bennett Street		Street Address 25 Bennett Street	
City Warwick	State RI	City Warwick	State RI
Secretary Name Dennis P. Molloy		Treasurer Name Dennis P. Molloy	
Street Address 25 Bennett Street		Street Address 25 Bennett Street	
City Warwick	State RI	City Warwick	State RI
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS			
Director Name Dennis P. Molloy		Director Name Blank	
Street Address 25 Bennett Street		Street Address Blank	
City Warwick	State RI	City Blank	State Blank
Director Name Blank		Director Name Blank	
Street Address Blank		Street Address Blank	
City Blank	State Blank	City Blank	State Blank
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)		11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)	
AUTHORIZED SHARES		ISSUED SHARES	
Number of Shares 600 \$1.00 PAR VALUE	Class/Series 	Number of Shares 100	Class/Series Common
Par Value \$1.00		Par Value \$1	

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



* 9 9 1 7 6 *

File Date: **02-09-99**

Check No.: **1819**

By: **JD. [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] **2-6-99**
Signature of Officer Date

Dennis P. Molloy
Print or Type Name of Officer

President
Title of Officer