2. Name of Corporation

E.P. MAIL & FREIGHT, INC.

(FORM MUST BE TYPED IN BLACE)

3. Street Address Principal Business Office

500 WATERMAN AVENUE

1. Corporate ID No.

4. Business Phone No.

121280

Matthew A. Brown, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401.222.3040

Zip

02914

State

R.I.

PROFIT CORPORATION	ANNUAL REPORT FOR THE YEAR	2005
Filing Period: January 1 - March 1	Filing Fee: SSD 60	2003
y - 1.2m. cm -	1 1117, 1 00 0000	

5. State of Incorporation

City

EAST PROVIDENCE

4. Business Phone No. 4014389797		5. State of Incorpora RHODE ISLA			6. SIC Code 7856
7 Brief Description of the Chasting, PACKING,	aructer of Business MAILING, RE				7856
			ATTACHMENT) FILL IN SPACE	ES BEFORE USING	ATTACHMENTS
LIDIA M. JANUARIO	0		Vice President Name JOHN C. JANUARIO		
Street Address			Street Address		
135 NORTH HULL ST	TREET		135 NORTH HULL ST	PRET	
City	State	7.ip	City	State	Zip
EAST PROVIDENCE	RI	02914	EAST PROVIDENCE	RI	02914
Secretary Nume			Treusurer Name		
LIDIA M. JANUARIO	0		JOHN C. JANUARIO		
Street Address 135 NORTH HULL ST			Street Address		
TID NORTH HOLL S.			135 NORTH HULL ST	REET	_
EAST PROVIDENCE	State R I	Ζί ρ	City	State	Zip
		02914	EAST PROVIDENCE	RI	02914
Director Name	SSES OF THE D	TIRECTORS ("X" BOX FO	RATTACHMENT) TILL IN SPA	CES BEFORE USING	ATTACHMENTS
LIDIA M. JANUARIO)		JOHN C. JANUARIO		
Street Address			Street Address		
135 NORTH HULL ST	TREET		135 NORTH HULL ST	REET	
City	State	Zip	City	State	Zip
EAST PROVIDENCE	RI	02914	EAST PROVIDENCE	RI	02914
Director Nume NONE			Director Name NONE	•	,4021
Street Address			Street Address	•	•
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZ	LED ("X" BOX FO	OR ATTACHMENT)	11. SHARES ISSUED ("X" BO	OX FOR ATTACHME!	vπ 🗆
Number of Shares	Class/Series	Par Value	ISSUED SHARES Number of Shares	Class/Series	Par Value
1,000	COMMON	NO PAR VALUE	200	COMMON	NO PAR VALUE
This report must be sign	ed in ink by ei	ther the President, Vice	President, Secretary, Assistan	t Secretary, Treas	urer, Receiver or Trustee
1 2 1	2 8 0		Under penalty of perjury, this report, including any and that all statements co	accompanying sched	fules and statements.
File Date 2 38	02		Lika h.	Jamain	2-15-05
Check No. 1813			Signature of Officer	Januario	Date
β <u>ν. V).</u>		_	Print or Type Nume of Offic	er	
FOR SECRETARY OF STATE	USE ONLY		Tale of Officer	 .	Form 630 12/01
		_			. 0.02 030 1201



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004 Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN B	•	g ree: \$30.00				
1. Corporate ID No.	2. Name of Corporation					
121280	E.P. MAIL & FR	EIGHT, INC.				
3. Street Address Principal Busin			City	State	Zip	
500 WATERMAN AVENUE		EAST PROVIDENCE	RI	02914-		
4. Business Phone No.		5. State of Incorporation)		6. SIC Code	
4014389797		RHODE ISLANI	D		7856	
7. Brief Description of the Chard SHIPPING, PACKAGING	icter of Business Conducto , MAILING, RENT	rd in Rhode Island MAIL BOXES, COP	YING SERVICE			
8. NAMES AND ADDRESS	SES OF THE OFFICE	RS ("X" BOX FOR A)	TACHMENT) TILL IN SPACE	S BEFORE USING ATT	ACHMENTS	
President Name LIDIA M. JANUARIO			Vice President Name JOHN C. JANUARIO	• • • • • • • • • • • • • • • • • • • •	- 7.0u=	
Street Address			Street Address			
135 NORTH HULL STR	EET		. 135 NORTH HULL ST	rbet		
City	State	Zip	City	State	Zip	
EAST PROVIDENCE	R.I.	02914	BAST PROVIDENCE	R.I.	02914	
Secretary Name			Treasurer Name			
LIDIA M. JANUARIO			JOHN C. JANUARIO		 .	
Street Address 135 NORTH HULL STR	ERT		Street Address . 135 NORTH HULL ST	REET		
City	State	7.ip	'City	State	Zip	
EAST PROVIDENCE	R.I.	02914	EAST PROVIDENCE	R.I.	02914	
9. NAMES AND ADDRESS	ES OF THE DIRECT	ORS ("X" BOX FOR	ATTACHMENT) FILL IN SPAC	ES BEFORE USING AT	TACHMENTS	
Director Name			Director Name			
LIDIA M. JANUARIO	······································		JOHN C. JANUARIO			
Street Address	France		. Street Address			
135 NORTH HULL STR		1 	135 NORTH HULL STREET			
EAST PROVIDENCE	State R.I.	<i>Σφ</i> 02914	City BAST PROVIDENCE	State R.I.	<i>Σφ</i> 02914	
Director Name	1	.1	Director Name			
NONB			NONB			
Street Address			·Street Address			
City	State	Zip	City	State	IZin	
·			•	State	Zip	
10. SHARES AUTHORIZE	D CX BOX FOR ATT	CHMENT)	11. SHARES ISSUED ("X" BC	X FOR ATTACHMENT		
AUTHORIZED SHARES			ISSUED SHARES	MI ON MI / MCIIMENT)	<u> </u>	
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value	
1,000 NO PAR VALUE			200	СОММОИ	NO PAR VALUE	
This						
enis report must ne signet	I IN INK DY EITHER th	e rresident, Vice Pi	resident, Secretary, Assistan	t Secretary, Treasure	er, Receiver or Trustee	
AT ITEMS INVESTIGATE	CORD HERE CON					
					_	
II MARA BARA BARA						
, , ,			Under penalty of perjury,			
4404000 000 000		1	this report, including any	accompanying schedule	es and statements,	
*121280 DBC 01/05/04	02:16:20 PM		and that all statements co	niaineo nerein are true i	ina correct.	
File Date	LED		Lide L	Home and in	2-4-04	
4 •	18 2004		Signature of Officer	Dat		
Check No.		\	Lidia MJanuario			
A	$\sim / \cdot $	U _U/3	Print or Type Name of Office	m	·	
By:		المولار =	Procile	-		
FOR SECRETARY OF STATE-	JSE ONLY V	•	Title of Officer	Į.	Form 630 12/01	
					030 1801	

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

ST	OP)
PTF ASI INSTRU	
LANIRO	HOY

CHORM MUST BE TYPED OR PRINTED IN BLACKS 1. Corporate ID No. 2. Name of Corporation 121280 E.P. MAIL & FREIGHT, INC. 3. Street Address Principal Business Office City State Zip 500 WATERMAN AVENUE 4 Business Phone No. East Providence RI 02914 5 State of Incorporation 6 SIC Code 438-9090 RHODE ISLAND 7856 7. Brief Description of the Character of Business Conducted in Rhode Island SHIPPING, PACKAGING, MAILING, RENT MAIL BOXES AND COPYING SERVICE 8. NAMES AND ADDRESSES OF THE OFFICERS (*x* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS President Name Vice President Name I.IDIA M. JANUARIO JOHN C. JANUARIO Street Address Street Address 135 NORTH HULL STREET 135 NORTH HULL STREET State Zip State EAST PROVIDENCE RΙ 02914 EAST PROVIDENCE 02914 RI Secretary Name Treasurer Name JOHN C. JANUARIO LIDIA M. JANUARIO Street Address Street Address 135 NORTH HULL STREET 135 NORTH HULL STREET City Zip EAST PROVIDENCE RΙ 02914 EAST PROVIDENCE 02914 RI 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Director Name LIDIA M. JANUARIO JOHN C. JANUARIO Street Address Street Address 135 NORTH HULL STREET 135 NORTH HULL STREET City Zip City EAST PROVIDENCE RI 02914 EAST PROVIDENCE RI 02914 Director Name Director Name NONE NONE Street Address Street Address City State Zip State Zip 10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) AUTHORIZED SHARES ISSUED SHARES Number of Shares Class/Series Par Value Number of Shares Class/Series Par Value 1,000 NO PAR VALUE 200 COMMON NO PAR VALUE

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

	* 1 2 1 2 8 0 *
File Date:	<u> 200.03</u>
Check No.:	1333
gy:	COESTATE 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.

Kichia m.	Jameins	2-14-03
Signature of Officer	<i>IJ</i>	Date

	•		
LIDIA M.	JANUARIO,	President	
Paratina Time Nices at	(246)		

tle of Officer		

Edward S. Inman, III. Secretary of State Corporations Distition 190 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 BLA	CK)				
1. Corporate ID No.	2 Name of Corporat	ina			
121280	E.P. MAIL & F	FREIGHT, INC.			
3 Street Address Principal Business			City	State	Zip
135 North H	ull Street		East Providence	RI	02914
4. Business Phone No.		5. State of Incorporation			6 SIC Code
438-5050		RHODE ISLAND			7856
7 Brief Description of the Character	of Business Conducted in	Rhode Island			7020
Shipping, p	ackaging, mai	lling, rent mail 1	ooxes		
			MENT) . FILL IN SPACES BE	FORE USING ATTAC	CHMENTS
			Vice President Name John C. Jan	uario	
Lidia M. Ja	nuario			darro	
135 North H	ull Street		Street Address 135 North H	ull Street	
Cin Cin	State	Zip	City		
East Providence	RI	02914	East Providence	State RI	^{Z_{1P}} 02914
Secretary Name	KI	02721	Treasurer Name		
Lidia M. Ja	nuario		John C. Januario		
Street Address	ilidal 10		Street Address		
. 135 North H	n11 Street		135 North Hull St	reet	
City	State	Zip	City	State	Zip
East Providence	R1	02914	East Providence	RI	02914
9. NAMES AND ADDRESS	SES OF THE DIRE	CTORS ("X" BOX FOR ATTAC	CHMENT) FILL IN SPACES E	BEFORE USING ATTA	ACHMENTS
Director Name			Director Name		1011.712.710
Lidia M. Ja	nuario		John C. Januario		
Street Address			Street Address		
135 North H	Iull Street		135 North Hull St	reet	
City	State	Zip	City	State	Zip
East Providence	RI	02914	East Providence	RI	02914
Director Name		·	Director Name		
None			None		
Street Address			Street Address		
Cuv	State	Zip	City	State	Zip
10. SHARES AUTHORIZED	O ("X" BOX FOR ATTA	- CHMENT)	11. SHARES ISSUED (*x*	BOX FOR ATTACHMENT	")
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Senes	Par Value

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

200



FOR SECRETARY OF STATE USE ONLY

1,000 NC PAR VALUE

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

Title of Officer -2¹²/₂20 S

Torm 630 12.01

No Par Value