



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No 126882 2. Name of Corporation STERNLIEB CLEANING, INC.
3. Street Address Principal Business Office 82 HAWTHORNE AVENUE/ PO BOX 3782 City CRANSTON State RI Zip 02910-
4. Business Phone No 401 781 9238 5. State of Incorporation RHODE ISLAND 6. SIC Code 7476
7. Brief Description of the Character of Business Conducted in Rhode Island
TO OWN AND OPERATE A HOME AND OFFICE CLEANING BUSINESS

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

President Name			Vice President Name		
Michael Sternlieb			Michael Sternlieb		
Street Address			Street Address		
P.O. Box 3782			P.O. Box 3782		
City	State	Zip	City	State	Zip
Cranston	RI	02910	Cranston	RI	02910
Secretary Name			Treasurer Name		
Michael Sternlieb			Michael Sternlieb		
Street Address			Street Address		
P.O. Box 3782			P.O. Box 3782		
City	State	Zip	City	State	Zip
Cranston	RI	02910	Cranston	RI	02910

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)

Number of Shares	Class/Series	Par Value
1,000	NO PAR VALUE	

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

Number of Shares	Class/Series	Par Value
1000 Shares	Common	No Par

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



1 2 6 8 8 2

126882 DBC 03/04/05 02:34:17 PM
File Date 3-8-05
Check No 1554
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] 3/3/05
Signature of Officer Date
Michael Sternlieb
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

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(FORM MUST BE TYPED OR PRINTED IN BLACK)

Form with sections 1-11: Corporate ID No, Name of Corporation, Street Address, Business Phone No, State of Incorporation, Brief Description of the Character of Business, Names and Addresses of Officers, Names and Addresses of Directors, Shares Authorized, Shares Issued.

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



* 1 2 6 8 8 2 *

FOR SECRETARY OF STATE USE ONLY
File Date: 1-5-04
Check No: 1039
By: [Signature]

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: Michael Sternlieb
Title of Officer: Pres.



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 126882		2. Name of Corporation STERNLIEB CLEANING, INC.		
3. Street Address Principal Business Office 82 Hawthorne Avenue			City Cranston	State RI
4. Business Phone No. 781-9238		5. State of Incorporation Rhode Island		6. SIC Code 7476

7. Brief Description of the Character of Business Conducted in Rhode Island
To own and operate a home and office cleaning business

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

President Name Michael Sternlieb			Vice President Name None		
Street Address 82 Hawthorne Avenue			Street Address		
City Cranston	State RI	Zip 02910	City	State	Zip
Secretary Name Michael Sternlieb			Treasurer Name Michael Sternlieb		
Street Address 82 Hawthorne Avenue			Street Address 82 Hawthorne Avenue		
City Cranston	State RI	Zip 02910	City Cranston	State RI	Zip 02910

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
1,000	Common	No Par Value

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

ISSUED SHARES		
Number of Shares	Class/Series	Par Value
1,000	Common	No Par Value

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



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File Date: 9-18-03
Check No.: 1031
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] 9/16/03
Signature of Officer Date
Michael Sternlieb
Print or Type Name of Officer
President
Title of Officer