



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 02903-13
401.222.30

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. 53284		2. Name of Corporation N. Pelletier, Inc.			
3. Street Address Principal Business Office 211A Hatchery Road			City North Kingstown	State RI	Zip 02852
4. Business Phone No. (401) 294-4184		5. State of Incorporation RHODE ISLAND			6. SIC Code 18
7. Brief Description of the Character of Business Conducted in Rhode Island CONSTRUCTION, REMODELING					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Norman L. Pelletier			Vice President Name Norman L. Pelletier		
Street Address 211A Hatchery Road			Street Address 211A Hatchery Road		
City No. Kingstown	State RI	Zip 02852	City No. Kingstown	State RI	Zip 02852
Secretary Name Norman L. Pelletier			Treasurer Name Norman L. Pelletier		
Street Address same as above			Street Address same as above		
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
300 COMM NO PAR VALUE			50	common	no par value

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



53284

File Date 2-10-05
Check No. 1905
By: MB

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.

Norman L. Pelletier 2508
Signature of Officer Date
Norman L. Pelletier
Print or Type Name 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 02903-133
401.222.304

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 53284		2. Name of Corporation N. Pelletier, Inc.		
3. Street Address Principal Business Office 211A Hatchery Road		City North Kingstown	State RI	Zip 02852
4. Business Phone No. (401) 294-4184		5. State of Incorporation RHODE ISLAND		6. SIC Code 18

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

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

President Name Norman L. Pelletier			Vice President Name Norman L. Pelletier		
Street Address 211A Hatchery Road			Street Address 211A Hatchery Road		
City No. Kingstown	State RI	Zip 02852	City No. Kingstown	State RI	Zip 02852
Secretary Name Norman L. Pelletier			Treasurer Name Norman L. Pelletier		
Street Address same as above			Street Address same as above		
City	State	Zip	City	State	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) **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
300 COMM NO PAR VALUE			50	common	no par value

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



* 5 3 2 8 4 *

File Date 3/17/04
Check No. 1781
By: SC

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.

Norman L. Pelletier 3-11-04
Signature of Officer Date

Norman L. Pelletier
Print or Type Name of Officer
President

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. **53284** 2. Name of Corporation **N. Pelletier, Inc.**
3. Street Address Principal Business Office **211 A Hatchery Road** City **North Kingstown** State **RI** Zip **02852**
4. Business Phone No. **(401) 294-4184** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **18**

7. Brief Description of the Character of Business Conducted in Rhode Island
Construction, remodeling and any other lawful purpose

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

President Name Norman L. Pelletier	Vice President Name Norman L. Pelletier
Street Address 211A Hatchery Road	Street Address 211A Hatchery Road
City No. Kingstown State RI Zip 02852	City No. Kingstown State RI Zip 02852
Secretary Name Norman L. Pelletier	Treasurer Name Norman L. Pelletier
Street Address same as above	Street Address same as above
City _____ State _____ Zip _____	City _____ State _____ 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
300 COMM NO PAR VALUE

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

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

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



* 5 3 2 8 4 *

File Date: 3.12.03

Check No.: 1737

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.

Norm Pelletier 2-25-03
Signature of Officer Date

Norman L. Pelletier
Print or Type Name 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 02903-1333
401-222-304



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. **53284** 2. Name of Corporation **N. Pelletier, Inc.**
3. Street Address Principal Business Office **211 A Hatchery Road** City **North Kingstown** State **RI** Zip **02852**
4. Business Phone No. **(401) 294-4184** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **18**

7. Brief Description of the Character of Business Conducted in Rhode Island
Construction, remodeling and any other lawful purpose

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

President Name Norman L. Pelletier	Vice President Name Norman L. Pelletier
Street Address 211A Hatchery Road	Street Address 211A Hatchery Road
City No. Kingstown State RI Zip 02852	City No. Kingstown State RI Zip 02852
Secretary Name Norman L. Pelletier	Treasurer Name Norman L. Pelletier
Street Address same as above	Street Address same as above
City _____ State _____ Zip _____	City _____ State _____ 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
300 COMM NO PAR VALUE		

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

ISSUED SHARES

Number of Shares	Class/Series	Par Value
50	common	no par value

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



* 5 3 2 8 4 *

File Date: 3-5-02

Check No.: 1653

By: Km

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.

Norman Pelletier 2-27-02
Signature of Officer Date

Norman L. Pelletier

Print or Type Name of Officer

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. **53284** 2. Name of Corporation **N. Pelletier, Inc.**

3. Street Address Principal Business Office **211 A Hatchery Road** City **North Kingstown** State **RI** Zip **02852**

4. Business Phone No. **(401) 294-4184** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **18**

7. Brief Description of the Character of Business Conducted in Rhode Island
Construction, remodeling and any other lawful purpose

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

President Name Norman L. Pelletier	Vice President Name Norman L. Pelletier
Street Address 211A Hatchery Road	Street Address 211A Hatchery Road
City No. Kingstown State RI Zip 02852	City No. Kingstown State RI Zip 02852

Secretary Name Norman L. Pelletier	Treasurer Name Norman L. Pelletier
Street Address same as above	Street Address same as above
City _____ State _____ Zip _____	City _____ State _____ 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
300 SHS COM NO PAR VAL		

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

ISSUED SHARES

Number of Shares	Class/Series	Par Value
50	common	no par value

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



File Date: 2/15

Check No.: 1529

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.

Norman Pelletier 1-8-01
Signature of Officer Date

Norman L. Pelletier
Print or Type Name 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 02903-1330
401-222-3000



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. **53284** 2. Name of Corporation **N. Pelletier, Inc.**
3. Street Address Principal Business Office **211A Hatchery Road** City **North Kingstown** State **RI** Zip **02852**
4. Business Phone No. **(401) 294-4184** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **18**
7. Brief Description of the Character of Business Conducted in Rhode Island
Construction, remodeling, and any other lawful purpose

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

President Name Norman L. Pelletier Street Address 211A Hatchery Road City North Kingstown State RI Zip 02852	Vice President Name Norman L. Pelletier Street Address 211A Hatchery Road City North Kingstown State RI Zip 02852
Secretary Name Norman L. Pelletier Street Address same as above City same as above State same as above Zip same as above	Treasurer Name Norman L. Pelletier Street Address same as above City same as above State same as above Zip same as above

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

Director Name None Street Address None City None State None Zip None	Director Name None Street Address None City None State None Zip None
Director Name None Street Address None City None State None Zip None	Director Name None Street Address None City None State None Zip None

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

AUTHORIZED SHARES	Class/Series	Par Value
Number of Shares		
300 SHS COM NO PAR VAL		

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

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

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



File Date: PAID **1410**
Check No.: FEB 29 2000 **1450**

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.

Norman L. Pelletier 2-25-00
Signature of Officer Date
Norman L. Pelletier
Print or Type Name 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 02903-133
401-222-304



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. **53284** 2. Name of Corporation **N. Pelletier, Inc.**
3. Street Address Principal Business Office **211A Hatchery Road** City **North Kingstown** State **RI** Zip **02852**
4. Business Phone No. **(401) 294-4184** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **18**

7. Brief Description of the Character of Business Conducted in Rhode Island
Construction, remodeling, and any other lawful purpose

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

President Name Norman L. Pelletier	Vice President Name Norman L. Pelletier
Street Address 211A Hatchery Road	Street Address 211A Hatchery Road
City North Kingstown State RI Zip 02852	City North Kingstown State RI Zip 02852
Secretary Name Norman L. Pelletier	Treasurer Name Norman L. Pelletier
Street Address same as above	Street Address same as above
City North Kingstown State RI Zip 02852	City North Kingstown State RI Zip 02852

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 None State None Zip None	City None State None Zip None
Director Name	Director Name
Street Address	Street Address
City None State None Zip None	City None State None Zip None

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

AUTHORIZED SHARES	Class/Series	Par Value
300 SHS COM NO PAR VAL		

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

ISSUED SHARES	Class/Series	Par Value
50	common	no par value

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



* 5 3 2 8 4 *

File Date: Feb 5, 99

Check No.: 21419

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.

Norman L. Pelletier 2-1-99
Signature of Officer Date

Norman L. Pelletier
Print or Type Name 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 02903-1333
401-277-304

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. **53284** 2. Name of Corporation **N. Pelletier, Inc.**
3. Street Address Principal Business Office City State Zip
211A Hatchery Road North Kingstown RI 02852
4. Business Phone No. 5. State of Incorporation 6. SIC Code
(401) 294-4184 **RHODE ISLAND** **0018**
7. Brief Description of the Character of Business Conducted in Rhode Island

construction, remodeling, and any other lawful purpose

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

President Name	Vice President Name
Norman L. Pelletier	Norman L. Pelletier
Street Address	Street Address
211A Hatchery Road	211A Hatchery Road
City State Zip	City State Zip
North Kingstown RI 02852	North Kingstown RI 02852
Secretary Name	Treasurer Name
Norman L. Pelletier	Norman L. Pelletier
Street Address	Street Address
same as above	same as above
City State Zip	City State Zip

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

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

Number of Shares	Class/Series	Par Value
300 SHS COM NO PAR VAL		

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

ISSUED SHARES

Number of Shares	Class/Series	Par Value
50	common	no par value

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



* 5 3 2 8 4 *

File Date: 2.6.98

Check No.: 1293

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.

Norm L Pelletier 2-2-98
Signature of Officer Date

Norman L. Pelletier
Print or Type Name 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
 401-277-3040



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. **53284** 2. Name of Corporation **N. Pelletier, Inc.**
 3. Street Address Principal Business Office City State Zip
211A Hatchery Road **North Kingstown** **RI** **02852**
 4. Business Phone No. 5. State of Incorporation 6. SIC Code
(401) 294-4184 **RHODE ISLAND** **0018**

7. Brief Description of the Character of Business Conducted in Rhode Island
construction, remodeling, and any other lawful purpose

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

President Name Norman L. Pelletier	Vice President Name Norman L. Pelletier
Street Address 211A Hatchery Road	Street Address 211A Hatchery Road
City State Zip N. Kingstown RI 02852	City State Zip N. Kingstown RI 02852
Secretary Name Norman L. Pelletier	Treasurer Name Norman L. Pelletier
Street Address same as above	Street Address same as above
City State Zip	City State 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 AND ISSUED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
300 SHS COM NO PAR VAL			50	common	no par valu

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



File Date: 2.28.97

Check No.: 1914

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.

Norman L. Pelletier 2-28-97
 Signature of Officer Date

Norman L. Pelletier
 Print or Type Name 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) 277-3141

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

PLEASE TYPE OR PRINT IN BLACK INK.

1. CORPORATE ID NO 53284		2. NAME OF CORPORATION N. Pelletier, Inc.	
3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE 211A Hatchery Road		CITY N. Kingstown	STATE RI
4. BUSINESS PHONE NO. (401) 294-4184		5. STATE OF INCORPORATION RHODE ISLAND	6. SIC CODE 0618
7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND construction, remodeling, and any other lawful purpose			

8. NAMES AND ADDRESSES OF THE OFFICERS

PRESIDENT NAME Norman L. Pelletier			VICE PRESIDENT NAME Norman L. Pelletier		
STREET ADDRESS 211A Hatchery Road			STREET ADDRESS 211A Hatchery Road		
CITY N. Kingstown	STATE RI	ZIP CODE 02852	CITY N. Kingstown	STATE RI	ZIP CODE 02852
SECRETARY NAME Norman L. Pelletier			TREASURER NAME Norman L. Pelletier		
STREET ADDRESS Same as Above			STREET ADDRESS Same as Above		
CITY	STATE	ZIP CODE	CITY	STATE	ZIP CODE

9. NAMES AND ADDRESSES OF THE DIRECTORS

DIRECTOR NAME None			DIRECTOR NAME		
STREET ADDRESS			STREET ADDRESS		
CITY	STATE	ZIP CODE	CITY	STATE	ZIP CODE
DIRECTOR NAME			DIRECTOR NAME		
STREET ADDRESS			STREET ADDRESS		
CITY	STATE	ZIP CODE	CITY	STATE	ZIP CODE

10. SHARES AUTHORIZED AND ISSUED

AUTHORIZED SHARES			ISSUED SHARES		
NUMBER OF SHARES	CLASS / SERIES	PAR VALUE	NUMBER OF SHARES	CLASS / SERIES	PAR VALUE
300 SHS	COM NO PAR VAL		50	Common	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.

Norman L. Pelletier

Signature of Officer

Norman L. Pelletier

Print or Type Name of Officer

File Date: 3/7/96

Check No: 01086

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
 Filing Fee \$50.00

Make Checks Payable to: Secretary of State

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

0053284

Corporate ID: _____ Annual Report for the year: 1995

Name of Corporation: N. Pelletier, 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:

Business Corporation (See RIGL Chapter 7-1.1)

Professional Service Corporation (See RIGL Chapter 7-5.1)

Phone: () _____

Brief statement of the character of business conducted in Rhode Island:
construction, remodeling, and any other
lawful purpose

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

211A Hatchery Road
North Kingstown, RI 02852

Phone: (401) 294-4184

THE NAMES OF THE OFFICERS ARE:

PRESIDENT	STREET ADDRESS	CITY/STATE	ZIP CODE
Norman L. Pelletier	211A Hatchery Road, North Kingstown, RI	02852	
VICE PRESIDENT	STREET ADDRESS	CITY/STATE	ZIP CODE
Norman L. Pelletier	Same as Above		
SECRETARY	STREET ADDRESS	CITY/STATE	ZIP CODE
Norman L. Pelletier	Same as Above		
TREASURER	STREET ADDRESS	CITY/STATE	ZIP CODE
Norman L. Pelletier	Same as Above		

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	Number of Shares	Class / Series
300	Common, Without Par Value	50	Common, Without Par Value

Date January 2, 19 95

By: Norman L. Pelletier
 Norman L. Pelletier
 PRINT OR TYPE NAME OF OFFICER SIGNING
 President
 TITLE OF OFFICER SIGNING

Form 31 1/95

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.

REVENS, BLANDING, ST. PIERRE
 946 CENTERVILLE ROAD
 WARWICK RI 02886

FILED
 MAR 27 1995

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

Ch# 6021
mnc

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

Corporate ID: 0053284 Annual Report for the year: 1994

Name of Business Entity: N. Pelletier, 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

Phone: ()

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

211A Hatchery Road
North Kingstown, RI 02852

Phone: (401) 294-4184

Business Entity is checked over:

- 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:

Revens, Lanni, Revens & St. Pierre
946 Centerville Rd.
Warwick, RI 02886

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

Date of Organization: 1/5/89

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

THE NAMES OF THE OFFICERS ARE:

OFFICE	NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
<input checked="" type="checkbox"/> PRESIDENT	Norman L. Pelletier	211A Hatchery Road, North Kingstown, RI 02852		
<input type="checkbox"/> CHIEF EXECUTIVE OFFICER				
<input type="checkbox"/> CHIEF OPERATING OFFICER				
<input type="checkbox"/> SECRETARY	Norman L. Pelletier	Same as Above		
<input type="checkbox"/> CHIEF FINANCIAL OFFICER	Norman L. Pelletier	Same as Above		
<input type="checkbox"/> CHIEF RECORDS OFFICER	Norman L. Pelletier	Same as Above		

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
NONE			

NUMBER OF SHARES AUTHORIZED (If Applicable)		NUMBER OF SHARES ISSUED AND OUTSTANDING (If Applicable)	
NUMBER	CLASS	NUMBER	CLASS
300	Common	50	Common

Date: November 9, 1994
By: Norman L. Pelletier
President

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.

Revens, Lanni, Revens & St. Pierre
946 Centerville Road
Warwick, RI 02886

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 0058284 *274* Annual Report for the year 1993

FIRST: The name of the corporation is AIRPORT LIQUOR, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is liquor store

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 946 Centerville Road Warwick, RI 02886

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

Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
Norman L. Pelletier	President	17 Airport Road Warwick, RI
Norman L. Pelletier	Vice President	17 Airport Road Warwick, RI
Norman L. Pelletier	Secretary	17 Airport Road Warwick, RI
Norman L. Pelletier	Treasurer	17 Airport Road Warwick, RI

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
300	Common		None

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
50	Common		None

PAID
FEB 26 1993
SEEDY OF STATE

Dated January 4, 19 93

AIRPORT LIQUORS, INC.
(Name of Corporation)

By Norm L Pelletier
NORMAN L. PELLETIER

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

67749

Corporate ID 0053184 Annual Report for the year 1992

FIRST: The name of the corporation is AIRPORT LIQUOR, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is liquor store

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

FIFTH: Business address in Rhode Island 946 Centerville Road
Warwick, RI 02886

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

Name	Office	Address (including number, street, zip code)
.....	Director
.....	Director
.....	Director
Norman L. Pelletier	President	17 Airport Road Warwick, RI
Norman L. Pelletier	Vice President	17 Airport Road Warwick, RI
Norman L. Pelletier	Secretary	17 Airport Road Warwick, RI
Norman L. Pelletier	Treasurer	17 Airport Road Warwick, RI

SEVENTH: Number of Shares authorized:

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

FEB 05 1992

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
50	Common		SEC'Y OF STATE No par value

Dated January 6, 1992

AIRPORT LIQUOR, INC.
(Name of Corporation)

By Norman L. Pelletier
NORMAN L. PELLETIER
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 0053284

AC Annual Report for the year 1991

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FIFTH: Business address in Rhode Island 946 Centerville Road

Warwick, RI 02886

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

Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
Norman L. Pelletier	President	17 Airport Road Warwick, RI
Norman L. Pelletier	Vice President	17 Airport Road Warwick, RI
Norman L. Pelletier	Secretary	17 Airport Road Warwick, RI
Norman L. Pelletier	Treasurer	17 Airport Road Warwick, RI

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
300	Common		None

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
50	Common		None

PAID
FEB 25 1991
SECY OF STATE

Dated January 7, 19 91

AIRPORT LIQUORS, INC.
(Name of Corporation)

By Norman L. Pelletier

NORMAN L. PELLETIER
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 0058284

Annual Report for the year 1990 *AT*

FIRST: The name of the corporation is AIRPORT LIQUOR, INC.

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	Director	
	Director	
	Director	
Norman L. Pelletier	President	17 Airport Road, Warwick, RI
Norman L. Pelletier	Vice President	17 Airport Road, Warwick, RI
Norman L. Pelletier	Secretary	17 Airport Road, Warwick, RI
Norman L. Pelletier	Treasurer	17 Airport Road, Warwick, RI

SEVENTH: Number of Shares authorized:

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

EIGHTH: Number of Shares issued:

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

Dated January 2 1990

AIRPORT LIQUOR, INC.

(Name of Corporation)

By Norman L. Pelletier

Title President

(Report must be signed by an officer)