



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. **102085** 2. Name of Corporation **KLM CONSULTING, INC.**
3. Street Address Principal Business Office _____ City _____ State _____ Zip _____
4. Business Phone No. _____ 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **7286**
7. Brief Description of the Character of Business Conducted in Rhode Island _____

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

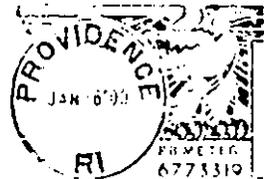
President Name	Vice President Name
Street Address	Street Address
City State Zip	City State Zip
Secretary Name	Treasurer Name
Street Address	Street Address
City State Zip	City State Zip

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

Director Name	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



PRESORTED
FIRST CLASS



KLM CONSULTING, INC.
c/o KAREN L. FORTE
52 SUNSET AVENUE
NORTH PROVIDENCE, RI 02911

KLMC052 029113020 1901 10
FORWARD TIME EXP RTN TO SEN
KLM CONSULTING INC
215 STILLWATER RD
SMITHFIELD RI 02917-1834
RETURN TO SENDER