



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. 107685		2. Name of Corporation COMING ATTRACTIONS, INC.	
3. Street Address Principal Business Office 59 Swamp Road		City Little Compton	State RI
4. Business Phone No. 401-635-2077		5. State of Incorporation RHODE ISLAND	6. SIC Code 9613
7. Brief Description of the Character of Business Conducted in Rhode Island THE RENTAL OF VIDEO CASSETTES AND RELATED PRODUCTS.			
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name Nancy DeSouza		Vice President Name David R. DeSouza	
Street Address 59 Swamp Road		Street Address 59 Swamp Road	
City Little Compton	State RI	City Little Compton	State RI
Zip 02837		Zip 02837	
Secretary Name David R. DeSouza		Treasurer Name Nancy DeSouza	
Street Address 59 Swamp Road		Street Address 59 Swamp Road	
City Little Compton	State RI	City Little Compton	State RI
Zip 02837		Zip 02837	
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
Director Name Nancy DeSouza		Director Name David DeSouza	
Street Address 59 Swamp Road		Street Address 59 Swamp Road	
City Little Compton	State RI	City Little Compton	State RI
Zip 02837		Zip 02837	
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
4,000 NO PAR VALUE		100	Common
			No Par Value

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



FILED

File Date  
NOV 18 2005

Check No.  
By M82781

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  
Nancy DeSouza

Print or Type Name of Officer  
Nancy DeSouza

Title of Officer  
President



## 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. 107685		2. Name of Corporation COMING ATTRACTIONS, INC.			
3. Street Address Principal Business Office 59 Swamp Road			City Little Compton	State RI	Zip 02837
4. Business Phone No. 401-635-2077		5. State of Incorporation RHODE ISLAND			6. SIC Code 9613
7. Brief Description of the Character of Business Conducted in Rhode Island THE RENTAL OF VIDEO CASSETTES AND RELATED PRODUCTS.					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Nancy DeSouza			Vice President Name David R. DeSouza		
Street Address 59 Swamp Road			Street Address 59 Swamp Road		
City Little Compton	State RI	Zip 02837	City Little Compton	State RI	Zip 02837
Secretary Name David R. DeSouza			Treasurer Name Nancy DeSouza		
Street Address 59 Swamp Road			Street Address 59 Swamp Road		
City Little Compton	State RI	Zip 02837	City Little Compton	State RI	Zip 02837
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Nancy DeSouza			Director Name NONE		
Street Address 59 Swamp Road			Street Address		
City Little Compton	State RI	Zip 02837	City	State	Zip
Director Name David R. DeSouza			Director Name NONE		
Street Address 59 Swamp Road			Street Address		
City Little Compton	State RI	Zip 02837	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
4,000 NO PAR VALUE			100	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 0 7 6 8 5 \*

File Date 3/9/04  
Check No. 757  
By: SC

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

Nancy DeSouza

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. **107685** 2. Name of Corporation **COMING ATTRACTIONS, INC.**

3. Street Address Principal Business Office **59 Swamp Road** City **Little Compton** State **RI** Zip **02837**  
4. Business Phone No. **401-635-2077** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **9613**

7. Brief Description of the Character of Business Conducted in Rhode Island  
**Rental of video cassettes and related products**

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

President Name <b>Nancy DeSouza</b>	Vice President Name <b>David R. DeSouza</b>
Street Address <b>59 Swamp Road</b>	Street Address <b>59 Swamp Road</b>
City <b>Little Compton</b> State <b>RI</b> Zip <b>02837</b>	City <b>Little Compton</b> State <b>RI</b> Zip <b>02837</b>
Secretary Name <b>David R. DeSouza</b>	Treasurer Name <b>Nancy DeSouza</b>
Street Address <b>59 Swamp Road</b>	Street Address <b>59 Swamp Road</b>
City <b>Little Compton</b> State <b>RI</b> Zip <b>02837</b>	City <b>Little Compton</b> State <b>RI</b> Zip <b>02837</b>

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

Director Name <b>Nancy DeSouza</b>	Director Name
Street Address <b>59 Swamp Road</b>	Street Address
City <b>Little Compton</b> State <b>RI</b> Zip <b>02837</b>	City State Zip
Director Name <b>David R. DeSouza</b>	Director Name
Street Address <b>59 Swamp Road</b>	Street Address
City <b>Little Compton</b> State <b>RI</b> Zip <b>02837</b>	City State Zip

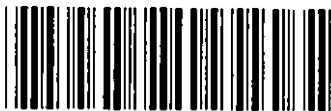
**10. SHARES AUTHORIZED (\*X\* BOX FOR ATTACHMENT)**

AUTHORIZED SHARES		
Number of Shares	Class/Series	Par Value
<b>4,000 NO PAR VALUE</b>		

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

ISSUED SHARES		
Number of Shares	Class/Series	Par Value
<b>100</b>	<b>Common</b>	<b>No Par Value</b>

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



\* 1 0 7 6 8 5 \*

File Date: 2/13/03  
Check No: 502  
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 2/11/03  
**Nancy DeSouza**

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 2002

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.

107685

2. Name of Corporation

COMING ATTRACTIONS, INC.

3. Street Address Principal Business Office

59 Swamp Road

City

Little Compton

State

RI

Zip

02837

4. Business Phone No.

401-635-2077

5. State of Incorporation

RHODE ISLAND

6. SIC Code

9613

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

Rental of video cassettes and related products

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

President Name

Nancy DeSouza

Vice President Name

David R. DeSouza

Street Address

59 Swamp Road

Street Address

59 Swamp Road

City

Little Compton

State

RI

Zip

02837

City

Little Compton

State

RI

Zip

02837

Secretary Name

David R. DeSouza

Treasurer Name

Nancy DeSouza

Street Address

59 Swamp Road

Street Address

59 Swamp Road

City

Little Compton

State

RI

Zip

02837

City

Little Compton

State

RI

Zip

02837

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

Director Name

Nancy DeSouza

Director Name

Street Address

59 Swamp Road

Street Address

City

Little Compton

State

RI

Zip

02837

City

State

Zip

Director Name

David R. DeSouza

Director Name

Street Address

59 Swamp Road

Street Address

City

Little Compton

State

RI

Zip

02837

City

State

Zip

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

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

4,000 NO PAR VALUE

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

ISSUED SHARES

Number of Shares

Class/Series

Par Value

100

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 0 7 6 8 5 \*

File Date:

3/11/02

Check No.:

3383

By:

*Nancy DeSouza*

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.

*Nancy DeSouza*  
Signature of Officer  
Nancy DeSouza

3/7/02  
Date

Print or Type Name of Officer

President

Title of Officer



STATE OF RHODE ISLAND  
AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State

Corporation  
100 North Main Street, Providence, RI 02903-1500  
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. **107685** 2. Name of Corporation **COMING ATTRACTIONS, INC.**

3. Street Address Principal Business Office **59 Swamp Road** City **Little Compton** State **RI** Zip **02837**

4. Business Phone No. **401-635-2077** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **9613**

7. Brief Description of the Character of Business Conducted in Rhode Island  
**Rental of video cassettes and related products**

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

President Name **Nancy DeSouza** Vice President Name **David R. DeSouza**  
Street Address **59 Swamp Road** Street Address **59 Swamp Road**  
City **Little Compton** State **RI** Zip **02837** City **Little Compton,** State **RI** Zip **02837**

Secretary Name **David R. DeSouza** Treasurer Name **Nancy DeSouza**  
Street Address **59 Swamp Road** Street Address **59 Swamp Road**  
City **Little Compton** State **RI** Zip **02837** City **Little Compton** State **RI** Zip **02837**

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

Director Name **Nancy DeSouza** Director Name  
Street Address **59 Swamp Road** Street Address  
City **Little Compton** State **RI** Zip **02837** City State Zip

Director Name **David R. DeSouza** Director Name  
Street Address **59 Swamp Road** Street Address  
City **Little Compton,** State **RI** Zip **02837** City State Zip

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

AUTHORIZED SHARES  
Number of Shares Class/Series Par Value  
**4,000 NO PAR VALUE**

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

ISSUED SHARES  
Number of Shares Class/Series Par Value  
**100 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 0 7 6 8 5 ★

**FILED**

File Date: **FEB 07 2001**

Check No. **By CC 0278**

By: \_\_\_\_\_

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.

**Nancy DeSouza** 2/5/01  
Signature of Officer Date

**Nancy DeSouza**  
Print or Type Name of Officer

**President**  
Title 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 02903-1335  
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 **107685** 2. Name of Corporation **COMING ATTRACTIONS, INC.**

3. Street Address Principal Business Office

59 Swamp Road

City

Little Compton

State

RI

Zip

02837

4. Business Phone No.

401-635-2077

5. State of Incorporation

**RHODE ISLAND**

6. SIC Code

9613

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

Rental of video cassettes and related products.

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

President Name

Nancy DeSouza

Vice President Name

David R. DeSouza

Street Address

59 Swamp Road

Street Address

59 Swamp Road

City

Little Compton

State

RI

Zip

02837

City

Little Compton

State

RI

Zip

02837

Secretary Name

David R. DeSouza

Treasurer Name

Nancy DeSouza

Street Address

59 Swamp Road

Street Address

59 Swamp Road

City

Little Compton

State

RI

Zip

02837

City

Little Compton

State

RI

Zip

02837

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

Director Name

Nancy DeSouza

Director Name

Street Address

59 Swamp Road

Street Address

City

Little Compton

State

RI

Zip

02837

City

State

Zip

Director Name

David R. DeSouza

Director Name

Street Address

59 Swamp Road

Street Address

City

Little Compton

State

RI

Zip

02837

City

State

Zip

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

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

**4,000 NO PAR VALUE**

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

ISSUED SHARES

Number of Shares

Class/Series

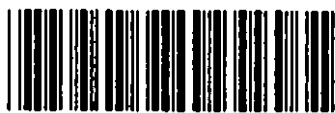
Par Value

100

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 0 7 6 8 5 \*

File Date: 1/5/00

Check No: 0132

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] 1/4/2000  
Signature of Officer Date

Nancy DeSouza  
Print or Type Name of Officer

President  
Title of Officer