



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. 109686		2. Name of Corporation Chemtex, Inc.		
3. Street Address Principal Business Office 110 King Philip Rd		City E. Providence	State RI	Zip 02916
4. Business Phone No. 401-431-1088		5. State of Incorporation Rhode Island		6. SIC Code 2297
7. Brief Description of the Character of Business Conducted in Rhode Island To engage in the business of sales, distribution + marketing of absorbents, Industrial Cleaning Supplies				
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
President Name Leonard Johnson		Vice President Name Jonathan Weitzner		
Street Address 110 King Philip Rd		Street Address 110 King Philip Rd		
City E. Providence	State RI	Zip 02916	City E. Providence	State RI
Secretary Name Leonard Johnson		Treasurer Name Jonathan Weitzner		
Street Address 110 King Philip Rd		Street Address 110 King Philip Rd		
City E. Providence	State RI	Zip 02916	City E. Providence	State RI
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
Director Name Leonard Johnson		Director Name		
Street Address 110 King Philip Rd		Street Address		
City E. Providence	State RI	Zip 02916	City	State
Director Name Jonathan Weitzner		Director Name		
Street Address 110 King Philip Rd		Street Address		
City E. Providence	State RI	Zip 02916	City	State
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>				
AUTHORIZED SHARES			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>	
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series
4000	No Par value		200	Common
				No PAR

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

FILED

JAN 11 2005

By **KMC**

054399

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 **Leonard Johnson** Date **12/23/04**

Print or Type Name of Officer **President**

Title of Officer

File Date _____
Check No _____
By: _____

FOR SECRETARY OF STATE USE ONLY



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. 104686		2. Name of Corporation CHEMTEX, INC.		
3. Street Address Principal Business Office 110 King Phillip Road		City East Providence	State RI	Zip 02916
4. Business Phone No 401-431-0990		5. State of Incorporation RHODE ISLAND		6. SIC Code 2659
7. Brief Description of the Character of Business Conducted in Rhode Island TO ENGAGE IN THE BUSINESS OF SALES, DISTRIBUTION AND MARKETING OF JANITORIAL AND INDUSTRIAL CLEANING SUPPLIES.				
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
President Name Leonard Johnson		Vice President Name Jonathan Weitzner		
Street Address 110 King Philip Road		Street Address 110 King Philip Road		
City E. Providence	State RI	Zip 02916	City E. Providence	State RI
Secretary Name Leonard Johnson		Treasurer Name Jonathan Weitzner		
Street Address 110 King Philip Road		Street Address 110 King Philip Road		
City E. Providence	State RI	Zip 02916	City E. Providence	State RI
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
Director Name Leonard Johnson		Director Name Jonathan Weitzner		
Street Address 110 King Philip Road		Street Address 110 King Philip Road		
City E. Providence	State RI	Zip 02916	City E. Providence	State RI
Director Name Jonathan Weitzner		Director Name Jonathan Weitzner		
Street Address 110 King Philip Road		Street Address 110 King Philip Road		
City E. Providence	State RI	Zip 02916	City E. Providence	State RI
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>				
AUTHORIZED SHARES			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>	
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series
4,000 NO PAR VALUE			200	Common
				No Par

05 JAN 11 PM 1:22

FILED

JAN 11 2005

By lmc

C54399

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.

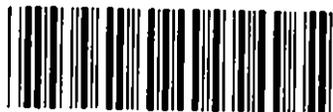
Signature of Officer
Leonard Johnson

Date
6/16/04

Print or Type Name of Officer

President

Title of Officer



* 1 0 4 6 8 6 *

File Date _____

Check No. _____

By: _____

FOR SECRETARY OF STATE USE ONLY

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. 104686 2. Name of Corporation CHEMTEX, INC.

3. Street Address Principal Business Office 110 King Philip Road City East Providence State RI Zip 02916

4. Business Phone No. (401) 431-0990 5. State of Incorporation RHODE ISLAND 6. SIC Code 2659

7. Brief Description of the Character of Business Conducted in Rhode Island
Sale/Distribution of Industrial Marketing Supplies

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

<p>President Name Leonard Johnson Street Address 110 King Philip Road City East Providence State RI Zip 02916</p> <p>Secretary Name Leonard Johnson Street Address 110 King Philip Road City East Providence State RI Zip 02916</p>	<p>Vice President Name Jonathan Weitzner Street Address 110 King Philip Road City East Providence State RI Zip 02916</p> <p>Treasurer Name Jonathan Weitzner Street Address 110 King Philip Road City East Providence State RI Zip 02916</p>
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9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

<p>Director Name Leonard Johnson Street Address 110 King Philip Road City East Providence State RI Zip 02916</p> <p>Director Name Jonathan Weitzner Street Address 110 King Philip Road City East Providence State RI Zip 02916</p>	<p>Director Name Street Address City State Zip</p> <p>Director Name Street Address City State Zip</p>
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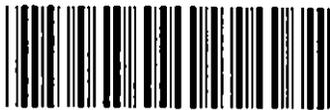
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

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
	200	Common	No Par

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



* 1 0 4 6 8 6 *

File Date: 3-13-03

Check No.: 1292

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:

Leonard Johnson
Print or Type Name of Officer

President
Title of Officer

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. **104686** 2. Name of Corporation **CHEMTEX, INC.**
3. Street Address Principal Business Office **110 King Philip Road** City **East Providence** State **RI** Zip **02916**
4. Business Phone No. **(401) 431-0990** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **2659**

7. Brief Description of the Character of Business Conducted in Rhode Island
Sale/distribution of industrial marketing supplies

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

President Name Leonard Johnson	Vice President Name Jonathan Weitzner
Street Address 110 King Philip Road	Street Address 110 King Philip Road
City East Providence State RI Zip 02916	City East Providence State RI Zip 02916
Secretary Name Leonard Johnson	Treasurer Name Jonathan Weitzner
Street Address 110 King Philip Road	Street Address 110 King Philip Road
City East Providence State RI Zip 02916	City East Providence State RI Zip 02916

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

Director Name Leonard Johnson	Director Name
Street Address 110 King Philip Road	Street Address
City East Providence State RI Zip 02916	City State Zip
Director Name Jonathan Weitzner	Director Name
Street Address 110 King Philip Road	Street Address
City East Providence State RI Zip 02916	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
	200	Common	No Par

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



File Date: 1-24-02
Check No.: 4165
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] 1/17/02
Signature of Officer **Leonard Johnson**
Date
Print or Type Name of Officer
President
Title 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. **104686** 2. Name of Corporation **CHEMTEX, INC.**

3. Street Address Principal Business Office

110 King Philip Road

4. Business Phone No.

(401) 431-0990-

5. State of Incorporation
RHODE ISLAND

City **East Providence** State **RI** Zip **02916**
6. SIC Code **2659**

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

Wholesale Sales of Automotive Parts

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

President Name **Leonard Johnson**

Vice President Name **Jonathan Weitzner**

Street Address **110 King Philip Road**

Street Address **110 King Philip Road**

City **East Providence** State **RI** Zip **02916**

City **East Providence** State **RI** Zip **02916**

Secretary Name **Leonard Johnson**

Treasurer Name **Johathan Weitzner**

Street Address **110 King Philip Road**

Street Address **110 King Philip Road**

City **East Providence** State **RI** Zip **02916**

City **East Providence** State **RI** Zip **02916**

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

Director Name **Leonard Johnson**

Director Name

Street Address **110 King Philip Road**

Street Address

City **East Providence** State **RI** Zip **02916**

City State Zip

Director Name **Jonathan Weitzner**

Director Name

Street Address **110 King Philip Road**

Street Address

City **East Providence** State **RI** Zip **02916**

City State Zip

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

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

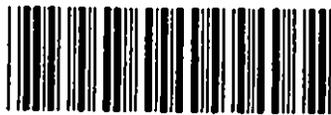
AUTHORIZED SHARES

ISSUED SHARES

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

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

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



* 1 0 4 6 8 6 *

File Date: 3/26/01

Check No.: 2028

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 1/30/01

Leonard Johnson

Print or Type Name of Officer

President

Title of Officer



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. **104686** 2. Name of Corporation **CHEMTEX, INC.**
3. Street Address Principal Business Office **110 King Philip Road** City **East Providence** State **RI** Zip **02916**
4. Business Phone No. **(401) 431-0990** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **2659**

7. Brief Description of the Character of Business Conducted in Rhode Island
Wholesale Sales of Nondurable Goods

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

President Name Leonard Johnson	Vice President Name Jonathan Weitzner
Street Address 110 King Philip Road	Street Address 110 King Philip Road
City State Zip East Providence RI 02916	City State Zip East Providence RI 02916
Secretary Name Leonard Johnson	Treasurer Name Jonathan Weitzner
Street Address 110 King Philip Road	Street Address 100 King Philip Road
City State Zip East Providence RI 02916	City State Zip East Providence RI 02916

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

Director Name Leonard Johnson	Director Name
Street Address 110 King Philip Road	Street Address
City State Zip East Providence RI 02916	City State Zip
Director Name Jonathan Weitzner	Director Name
Street Address 110 King Philip Road	Street Address
City State Zip East Providence RI 02916	City State Zip

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

AUTHORIZED SHARES
Number of Shares Class/Series Par Value

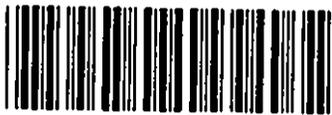
4,000 NO PAR VALUE

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

ISSUED SHARES
Number of Shares Class/Series Par Value

200 common no par

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



* 1 0 4 6 8 6 *

File Date: 3/13/00

Check No.: 1382

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 _____

Leonard Johnson

Print or Type Name of Officer

President

Title of Officer