



## 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. 113089		2. Name of Corporation B & G Associates, Ltd.			
3. Street Address Principal Business Office 245 Waterman Street			City Providence	State RI	Zip 02906
4. Business Phone No. 272-0804		5. State of Incorporation RHODE ISLAND			6. SIC Code 5579
7. Brief Description of the Character of Business Conducted in Rhode Island TO OWN AND OPERATE BUSINESSES, PLANTS, AND REAL AND PERSON PROPERTY OF VERY KIND AND TO PURCHASE, OWN, AND HOLD THE STOCK OF OTHER CORPORATIONS AND EQUITY INTEREST IN OTHER BUSINESS ENTITIES.					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Aram G. Garabedian			Vice President Name Dan M. Bliss		
Street Address 245 Waterman Street			Street Address 245 Waterman Street		
City Providence	State RI	Zip 02906	City Providence	State RI	Zip 02906
Secretary Name Lisa B. Regan			Treasurer Name Marc Genereux		
Street Address 245 Waterman Street			Street Address 245 Waterman Street		
City Providence	State RI	Zip 02906	City Providence	State RI	Zip 02906
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Aram G. Garabedian			Director Name Dan M. Bliss		
Street Address 245 Waterman Street			Street Address 245 Waterman Street		
City Providence	State RI	Zip 02906	City Providence	State RI	Zip 02906
Director Name Gary B. Garabedian			Director Name Lisa B. Regan		
Street Address 245 Waterman Street			Street Address 245 Waterman Street		
City Providence	State RI	Zip 02906	City Providence	State RI	Zip 02906
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
10,000 COMM NO PAR VALUE			100	Class A Voting	NO PAR VALUE
			9,900	Class B Non-Voting	NO PAR VALUE

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



\*113089\*

File Date 3/2/05  
Check No 155  
By 10.

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

Date

Print or Type Name of Officer

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**

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

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 113089		2. Name of Corporation B & G Associates, Ltd.			
3. Street Address Principal Business Office 245 Waterman Street			City Providence	State RI	Zip 02906
4. Business Phone No 272-0804		5. State of Incorporation RHODE ISLAND			6. SIC Code 5579
7. Brief Description of the Character of Business Conducted in Rhode Island TO OWN AND OPERATE BUSINESSES, PLANTS, AND REAL AND PERSON PROPERTY OF VERY KIND AND TO PURCHASE, OWN, AND HOLD THE STOCK OF OTHER CORPORATIONS AND EQUITY INTEREST IN OTHER BUSINESS ENTITIES.					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Aram G. Garabedian			Vice President Name Dan M. Bliss		
Street Address 245 Waterman Street			Street Address 245 Waterman Street		
City Providence	State RI	Zip 02906	City Providence	State RI	Zip 02906
Secretary Name Lisa B. Regan			Treasurer Name Marc Genereux		
Street Address 245 Waterman Street			Street Address 245 Waterman Street		
City Providence	State RI	Zip 02906	City Providence	State RI	Zip 02906
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Aram G. Garabedian			Director Name Dan M. Bliss		
Street Address 245 Waterman Street			Street Address 245 Waterman Street		
City Providence	State RI	Zip 02906	City Providence	State RI	Zip 02906
Director Name Gary B. Garabedian			Director Name Lisa B. Regan		
Street Address 245 Waterman Street			Street Address 245 Waterman Street		
City Providence	State RI	Zip 02906	City Providence	State RI	Zip 02906
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> AUTHORIZED SHARES			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> ISSUED SHARES		
Number of Shares 10,000 COMM NO PAR VALUE	Class/Series	Par Value	Number of Shares 100 9,900	Class/Series Class A Voting Class B Non-Voting	Par Value NO PAR VALUE NO PAR VALUE

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



\* 1 1 3 0 8 9 \*

File Date 1/30/04  
Check No. 143  
By: KMC

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.

Charles H. Brown 01/21/04  
Signature of Officer Date

MARC R. GENEREUX  
Print or Type Name of Officer

Treasurer  
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.

2. Name of Corporation

113089

B & G Associates, Ltd.

3. Street Address Principal Business Office

245 Waterman Street

4. Business Phone No.

272-0804

5. State of Incorporation

RHODE ISLAND

City

Providence

State

RI

Zip

02906

6. SIC Code

5579

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

To own and operate real and personal property.

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

FILL IN SPACES BEFORE USING ATTACHMENTS

President Name

Aram G. Garabedian

Street Address

245 Waterman Street

City

State

Zip

Providence

RI

02906

Secretary Name

Lisa B. Regan

Street Address

245 Waterman Street

City

State

Zip

Providence

RI

02906

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

FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

Aram G. Garabedian

Street Address

245 Waterman Street

City

State

Zip

Providence

RI

02906

Director Name

Gary B. Garabedian

Street Address

245 Waterman Street

City

State

Zip

Providence

RI

02906

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

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

10,000 COMM NO PAR VALUE

Providence

RI

02906

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

ISSUED SHARES

Number of Shares

Class/Series

Par Value

100

9,900

Class A Voting

NO PAR VALUE

Class B Non-

Voting

NO PAR VALUE

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



\* 1 1 3 0 8 9 \*

File Date: 3/24/03

Check No. 104

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] 02/24/03  
Signature of Officer Date

MARC R. GENEREUX  
Print or Type Name of Officer

Treasurer  
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. **113089** 2. Name of Corporation **B & G Associates, Ltd.**

3. Street Address Principal Business Office **245 Waterman Street** City **Providence** State **RI** Zip **02906**  
4. Business Phone No. **272-0804** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **5579**

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

To own and operate real and personal property.

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

President Name <b>Aram G. Garabedian</b> Street Address <b>245 Waterman Street</b> City <b>Providence</b> State <b>RI</b> Zip <b>02906</b>	Vice President Name <b>Dan M. Bliss</b> Street Address <b>245 Waterman Street</b> City <b>Providence</b> State <b>RI</b> Zip <b>02906</b>
Secretary Name <b>Lisa B. Regan</b> Street Address <b>245 waterman Street</b> City <b>Providence</b> State <b>RI</b> Zip <b>02906</b>	Treasurer Name <b>Marc Genereux</b> Street Address <b>245 Waterman Street</b> City <b>Providence</b> State <b>RI</b> Zip <b>02906</b>

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

Director Name <b>Aram G. Garabedian</b> Street Address <b>245 Waterman Street</b> City <b>Providence</b> State <b>RI</b> Zip <b>02906</b>	Director Name <b>Dan M. Bliss</b> Street Address <b>245 Waterman Street</b> City <b>Providence</b> State <b>RI</b> Zip <b>02906</b>
Director Name <b>Gary B. Garabedian</b> Street Address <b>245 Waterman Street</b> City <b>Providence</b> State <b>RI</b> Zip <b>02906</b>	Director Name <b>Lisa B. Regan</b> Street Address <b>245 Waterman Street</b> City <b>Providence</b> State <b>RI</b> Zip <b>02906</b>

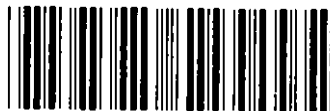
**10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)**

AUTHORIZED SHARES  
Number of Shares Class/Series Par Value  
**10,000 COMM NO PAR VALUE**

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

ISSUED SHARES  
Number of Shares Class/Series Par Value  
**100 Class A Voting NO PAR VALUE**  
**9,900 Class B Nonvoting NO PAR VALUE**

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



\* 1 1 3 0 8 9 \*

File Date: 4-17-02

Check No. 111

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] Date 4/16/02  
Signature of Officer

Marc B. Genereux  
Print or Type Name of Officer

TREASURER  
Title of Officer



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

Corporations Division  
100 North Main Street, Providence, RI 02903-1335  
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.

113089

2. Name of Corporation

B & G Associates, Ltd.

3. Street Address Principal Business Office

245 Waterman Street

City

Providence

State

RI

Zip

02906

4. Business Phone No.

272-0804

5. State of Incorporation

RHODE ISLAND

6. SIC Code

5579

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

To own and operate real and personal property.

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

President Name

Aram G. Garabedian

Street Address

245 Waterman Street

City

State

Zip

Providence

RI

02906

Secretary Name

Gary B. Garabedian

Street Address

245 Waterman Street

City

State

Zip

Providence

RI

02906

Vice President Name

Dan M. Bliss

Street Address

245 Waterman Street

City

State

Zip

Providence

RI

02906

Treasurer Name

Lisa B. Regan

Street Address

245 Waterman Street

City

State

Zip

Providence

RI

02906

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

Director Name

Aram G. Garabedian

Street Address

245 Waterman Street

City

State

Zip

Providence

RI

02906

Director Name

Gary B. Garabedian

Street Address

245 Waterman Street

City

State

Zip

Providence

RI

02906

Director Name

Dan M. Bliss

Street Address

245 Waterman Street

City

State

Zip

Providence

RI

02906

Director Name

Lisa B. Regan

Street Address

245 Waterman Street

City

State

Zip

Providence

RI

02906

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

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

10,000 COMM NO PAR VALUE

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

ISSUED SHARES

Number of Shares

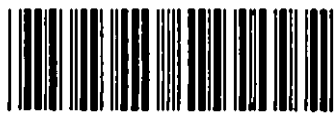
Class/Series

Par Value

100  
9,900

Class A Voting NO PAR VALUE  
Class B  
Nonvoting NO PAR VALUE

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



\* 1 1 3 0 8 9 \*

File Date: 3/14/01

107

Check No.: 2

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

Aram G. Garabedian 3/5/01  
Signature of Officer Date

Aram G. Garabedian  
Print or Type Name of Officer

President  
Title of Officer