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.	2. Name of Corporation			
84284	Major Development Corporation Inc.			
3. Street Address Principal Business Office		City	State	Zip
4. Business Phone No.	5. State of Incorporation			6. SIC Code
	RHODE ISLAND			34

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

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

President Name			Vice President Name		
Michael Picozzi			Carol A. Bamford		
Street Address			Street Address		
506 Hope Furnace Road			33 Wood Cove Drive		
City	State	Zip	City	State	Zip
Coventry	R.I.	02816	Coventry	R.I.	02816
Secretary Name			**Treasurer Name**		
Brian Bamford			Brian Bamford		
Street Address			Street Address		
33 Wood Cove Dr.			33 Wood Cove Drive		
City	State	Zip	City	State	Zip
Coventry	R.I.	02816	Coventry	R.I.	02816

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

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
4,000 NO PAR VALUE			100		NO PAR

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

[redacted]

84284

File Date 3/22/04
Check No. 8239
By: SC
FOR SECRETARY OF STATE USE ONLY

[redacted]

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.

Sec. 03/18/04
Signature of Officer *Date*
BRIAN BAMFORD.
Print or Type Name of Officer
Secretary
Title of Officer

Form 630 Rev. 12/03

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

STOP PLEASE READ INSTRUCTIONS

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No.	2. Name of Corporation			
84284	Major Development Corporation Inc.			
3. Street Address Principal Business Office		City	State	Zip
960 Tiogue Ave.		Coventry	RI	02816
4. Business Phone No.	5. State of Incorporation			6. SIC Code
401-822-1469	RHODE ISLAND			34

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

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

President Name	Vice President Name
Michael Picozzi	Carol A. Bamford
Street Address	Street Address
Hope Furnace Road	33 Wood Cove Drive
City / State / Zip	City / State / Zip
Coventry / RI / 02816	Coventry / RI / 02816
Secretary Name	**Treasurer Name**
Brian Bamford	Brian Bamford
Street Address	Street Address
33 Wood Cove Drive	33 Wood Cove Drive
City / State / Zip	City / State / Zip
Coventry / RI / 02816	Coventry / RI / 02816

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

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
4,000	NO PAR VALUE		100	Common	0/NO PAR

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

84284

File Date: 3-11-03

0976

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.

01/30/03.

1719 Quarrying & nonmetallic mining

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

STOP PLEASE READ INSTRUCTIONS

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.	2. Name of Corporation			
84284	Major Development Corporation Inc.			
3. Street Address Principal Business Office		City	State	Zip
960 Tiogue Ave.		Coventry	R.I.	02816
4. Business Phone No.	5. State of Incorporation			6. SIC Code
401-822-1469	RHODE ISLAND			34

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

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

President Name	Street Address	City	State	Zip
Michael Picozzi	506 Hope Furnace Road	Coventry	R.I	02816

Vice President Name	Street Address	City	State	Zip
CAROL A. BAMFORD	33 Wood Cove Drive	Coventry	R.I.	02816

Secretary Name	Street Address	City	State	Zip
BRIAN Bamford	33 Wood Cove Drive	Coventry	R.I.	02816

Treasurer Name	Street Address	City	State	Zip
BRIAN Bamford	33 Wood Cove Drive	Coventry	R.I	02816

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

Director Name	Street Address	City	State	Zip

Director Name	Street Address	City	State	Zip

Director Name	Street Address	City	State	Zip

Director Name	Street Address	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

[redacted]

* 8 4 2 8 4 *

[redacted]

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.

Carol A. Bamford, V.P. 2-27-02
Signature of Officer *Date*

CAROL A. BAMFORD VICE-President
Print or Type Name of Officer

VICE-president
Title of Officer

File Date: 4-10-02

Check No.: 7390

By: 2

FOR SECRETARY OF STATE USE ONLY

Form 630 12/01

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

STOP PLEASE READ INSTRUCTIONS

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.	2. Name of Corporation
84284	Major Development Corporation Inc.

3. Street Address Principal Business Office	City	State	Zip
960 Tiogue Ave	Coventry	RI	02816

4. Business Phone No.	5. State of Incorporation	6. SIC Code
401-822-1469	RHODE ISLAND	34

7. Brief Description of the Character of Business Conducted in Rhode Island
Building & Road Construction of single family Homes

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

President Name	Vice President Name
Michael Picozzi	Carol A Bamford
Street Address: 506 Hope Furnace Road	Street Address: 33 Wood Cove Drive
City: Hope State: RI Zip: 02831	City: Coventry State: RI Zip: 02816
Secretary Name	**Treasurer Name**
Brian Bamford	BRIAN Bamford
Street Address: 33 Wood Cove Drive	Street Address: 33 Wood Cove Drive
City: Coventry State: RI Zip: 02816	City: Coventry State: RI Zip: 02816

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

Director Name	Director Name
Street Address: N/A	Street Address: N/A
City / State / Zip	City / State / Zip
Director Name	**Director Name**
Street Address: N/A	Street Address: N/A
City / State / Zip	City / State / Zip

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

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

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

ISSUED SHARES		
Number of Shares	Class/Series	Par Value
4100	Common	-0-

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

* 8 4 2 8 4 *

File Date: 1/29

Check No.: 6457

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.

Carol A. Bamford 01/10/01
Signature of Officer *Date*

CAROL A. BAMFORD
Print or Type Name of Officer

Vice-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

STOP
PLEASE READ INSTRUCTIONS

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.	2. Name of Corporation
84284	Major Development Corporation Inc.

3. Street Address Principal Business Office	City	State	Zip
960 Tiogue Ave.	Coventry	R.I.	02816

4. Business Phone No.	5. State of Incorporation	6. SIC Code
401-822-1469	RHODE ISLAND	34

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

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

President Name	Vice President Name
Michael Picozzi	Carol A. Bamford
Street Address: Hope Furnace Rd.	Street Address: 33 Wood Cove Dr.
City: Hope State: R.I. Zip:	City: Coventry State: R.I. Zip: 02816
Secretary Name	**Treasurer Name**
Brian Bamford	
Street Address: 33 Wood Cove Dr.	Street Address:
City: Coventry State: R.I. Zip: 02816	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:

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

AUTHORIZED SHARES		
Number of Shares	Class/Series	Par Value
4,000 SHS	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

[redacted]

* 84284 *

File Date: 1-26-00

Check No: 6012

By: AMF

FOR SECRETARY OF STATE USE ONLY

[redacted]

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.

Carol A. Bamford 1-5-00
Signature of Officer *Date*

CAROL A. BAMFORD
Print or Type Name of Officer

Vice-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 1999

Filing Period: January 1–March 1 • Filing Fee: $50.00

STOP PLEASE READ INSTRUCTIONS

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.	2. Name of Corporation			
84284	Major Development Corporation Inc.			
3. Street Address Principal Business Office		City	State	Zip
33 Wood Cove Drive		Coventry	RI	02816
4. Business Phone No.	5. State of Incorporation			6. SIC Code
822-1469	RHODE ISLAND			34
7. Brief Description of the Character of Business Conducted in Rhode Island				
General Contractor				

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

President Name			Vice President Name		
Michael Picozzi			Carol Bemford		
Street Address			Street Address		
Hope Furnace Road			33 Wood Cove Drive		
City	State	Zip	City	State	Zip
Hope	RI	02831	Coventry	RI	02816
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

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
4,000 SHS 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

* 8 4 2 8 4 *

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.

Carol A. Bemford — 2/8/99
Signature of Officer — *Date*

Carol Bemford
Print or Type Name of Officer

Vice President
Title of Officer

FOR SECRETARY OF STATE USE ONLY

File Date: feb 10, 99
Check No.: 9607
By: JD, RV

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 FOR THE YEAR 1998

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

STOP PLEASE READ INSTRUCTIONS

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.	2. Name of Corporation
84284	Major Development Corporation Inc.

3. Street Address Principal Business Office	City	State	Zip
33 Wood Cove Drive	Coventry	RI	02816

4. Business Phone No.	5. State of Incorporation	6. SIC Code
401-822-1469	RHODE ISLAND	0034

7. Brief Description of the Character of Business Conducted in Rhode Island
General Contractor - Residential Housing Construction

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

President Name	Vice President Name
Michael Piccozzi	Carol Bamford
Street Address: Hope Furnace Road	Street Address: 33 Wood Cove Drive
City: Hope — State: RI — Zip: 02831	City: Coventry — State: RI — Zip: 02816
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*) ☐

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*) ☐ **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
4,000 SHS 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

[redacted] *84284* [redacted]

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.

Carol A. Bamford — 2/2/98
Signature of Officer — *Date*

Carol A. Bamford
Print or Type Name of Officer

[redacted] Vice President
Title of Officer

FOR SECRETARY OF STATE USE ONLY

File Date: 2/5/98
Check No.: 3053
By: WP

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

STOP: PLEASE READ INSTRUCTIONS BEFORE COMPLETING THIS FORM

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.	2. Name of Corporation			
84284	Major Development Corporation Inc.			
3. Street Address Principal Business Office		City	State	Zip
960 Tioque Avenue		Coventry	RI	02816
4. Business Phone No.	5. State of Incorporation			6. SIC Code
(401) 822-1469	RHODE ISLAND			0034

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

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

President Name	Street Address	City	State	Zip
Michael Picozzi	Hope Furnace Road	Hope	RI	02831

Vice President Name	Street Address	City	State	Zip
Carol Bamford	33 Wood Cove Drive	Coventry	RI	02816

Secretary Name	Street Address	City	State	Zip
None				

Treasurer Name	Street Address	City	State	Zip
None				

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

Director Name	Street Address	City	State	Zip
None				

Director Name	Street Address	City	State	Zip

Director Name	Street Address	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
4,000 SHS 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

[redacted] [redacted]

* 8 4 2 8 4 *

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.

Carol A. Bamford 3-14-97
Signature of Officer *Date*

Carol Bamford
Print or Type Name of Officer

V.P.
Title of Officer

File Date: 3.14.97
Check No: 4276
By: VP
FOR SECRETARY OF STATE USE ONLY

[redacted]

PROFIT CORPORATION ANNUAL REPORT

1996

Filing Period: January 1–March 1
Filing Fee: $50.00

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) 277-3040

PLEASE TYPE OR PRINT IN BLACK INK.

1. CORPORATE ID NO	2. NAME OF CORPORATION		
84284	Major Development Corporation Inc.		
3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE	CITY	STATE	ZIP CODE
960 Tiogue Avenue	Coventry	RI	02816
4. BUSINESS PHONE NO.	5. STATE OF INCORPORATION		6. SIC CODE
(401) 822-1469	RHODE ISLAND		0034

7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND
Residential Housing Construction / Development

8. NAMES AND ADDRESSES OF THE OFFICERS

PRESIDENT NAME			VICE PRESIDENT NAME		
Michael Picozzi			Carol Bamford		
STREET ADDRESS			STREET ADDRESS		
Hope Furnace Road			33 Wood Cove Drive		
CITY	STATE	ZIP CODE	CITY	STATE	ZIP CODE
Hope	RI	02831	Coventry	RI	02816
SECRETARY NAME			TREASURER NAME		
None			None		
STREET ADDRESS			STREET ADDRESS		
CITY	STATE	ZIP CODE	CITY	STATE	ZIP CODE

9. NAMES AND ADDRESSES OF THE DIRECTORS

DIRECTOR NAME			DIRECTOR NAME		
None					
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
4,000 SHS	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

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.

Michael Picozzi
Signature of Officer

MICHAEL PICOZZI
Print or Type Name of Officer

Pres
Title of Officer

3-7-96
Date

File Date: 3/7/96

Check No: 4473

By: cl/lp

For Secretary of State Use Only