

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

Corporations Divis 100 North Main Su Providence, RI 02003-1;

San Matthe	w A. brown, Secret	uy of State			401.222.3
PROFIT COR	PORATION.	ANNUAL REPO	DT EAD THE S	/E + D 00	
Filling Period: January	v I - March 1 •	Filing Fee: \$50.00	KI FOR THE	LAR	005
(FORM MUST BE TYPED O	R PRINTED IN BLACK)	roing ree. 350.00			
1. Gorporate ID No.	2 Name of Corp				
65691	- '	Harris, Esquire, Ltd.			
3. Street Address Principal Bu	isiness Office	marris, Esquire, Ltd.			
13a Do	RAANCE	J.,	PROVID	State	Zip
1. Triating Physic (A)		5. State of Incorporation	" 1 16/00/50	ence va	05d03
401-273-	4990	===			6. SIC Code
7. Brief Description of the Cha TO ENGAGE IN TH	nucter of Business Conduc	ted in Rhode Island	<u>U</u>		7617
8. NAMES AND ADDRE	ESSES OF THE OFFI	CERS: ("X" BOX FOR AT	TACHMENT) (FIL	L'IN SPACES BEFORE USI	NC ATTACHMENTS
· · · · · · · · · · · · · · · · · · ·			Vice President Name	- III OTHERS BELOKE OSI	NG ATTACHMENTS
STARTIN D	· HARRIS,		MARTIN	D. HARRIC	
Street Address			Stron Address	D. GARKIS	<u> </u>
132 DORR			<u>: 1</u> 3a Do	RRANCE S	. k
Room A	State	Zip	: City	State	Zip
NCritary Name	Le.I	102903	····(·································	uce R=	02903
GLIZABON	h Ferro	11.000:0	Treasurer Name	^	•••••••••••••••••••••••••••••••••••••••
Street Address	W BERRO	HHEKIZ	= BIARTIN	D. HARRIS	
132 DORK	RANCE SH	.	Street Address		
City	State	Zip		ORRANCE S	<u> 7 · </u>
Knoviden	6 R	02903		State	Zip
. NAMES AND ADDRE	SSES OF THE DIREC	CTORS: ("X" BOX FOR A			102903
Director Name		,	Director Name	LL IN SPACES BEFORE US	ING ATTACHMENTS
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incet Address	· · · · · · · · · · · · · · · · · · ·		Street Address		
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ity	State	Zip	City	State	Zip
irector Name					
The state of the s			Director Name	****************************	······································
inet Address					
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n _l .	State	Zip		-	
			City	State	Zip
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UTHORIZED SHARES		/ L	ISSUED SHARES	D ("X" BOX FOR ATTAC	HMENT)
umber of Shares	Class/Series	Par Value	Number of Shares	Classicadia	
100 NO PAR VALUE				Class/Series	Par Value
			100	Comman	

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



File Date	F	ILED	
Check No.	APR	2 6 2005	5570
Ву:	Ву	UB.	
	FOR SECRETARY O	F STATE USE ON	LY

Under penalty of perjury. I declare and affirm that I have ex	
perjusy: I declare and affill that I have ex	amined this repor
including any accompanying schedules and statements, and	that all statement
contained herein are true and correct.	



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State $\,$.

Matthew A. Brown, Secretary of State

Corporations Divisit 100 North Main Stre Providence, RI 02903-13 401.222.30

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 3004

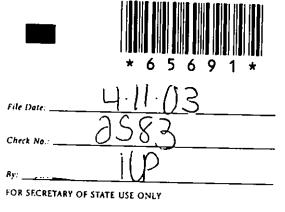
CPORM MUST BE TYPED OR PRIN	NTED IN BLACK)				
1. Corporate ID No.	2. Name of Corporation	-			 . <u></u> -
05691	LIMRTIN	D. HARRIS	ESQUIRE 2	T D	
3. Street Address Principal Business (Office			1 -	Zip
132 DO PERZ.	ANCE ST	FREET	Providence	RI	[02403
	// O O N	5. State of Incorporation			6. SIC Code
401-273-4	7990	RhoDe	ISLAND		76/7
7. Brief Description of the Character	of Business Conducted in R	bode Island			
8. NAMES AND ADDRESSES President Name	OF THE OFFICERS:	("X" BOX FOR ATTA		CES BEFORE USING A	ITACHMENTS
MARTIN D.	too - " co		Vice President Name		
Street Address	IH-KRIS			+ARRIS	
132 DORRA	NCE STI	T	Sircei Address 139 DORIE	-AUCE St.	
PRODICE NCE]" R=	7º02903	Providence	State RI	zip ひみりつご
ELIZABETH	FOREN H	LABO:	Treasurer Name		اهم ـ ۱
Street Address	DEICKG (tarris_	GLIZABET)	n terre	> HARRIS
10 - 2	ANCE ST	_	Street Address		
Cirp	State -	Zip		ANCE ST.	
Tenvidence	RE	02903	Providence	State Re-	Zip a a a a
9. NAMES AND ADDRESSES	OF THE DIRECTORS	S: ("X" BOX FOR ATT	IT TO UT RELIED OF	ACES BEFORE USING	102900
Director Name		(-	Director Name	ACES BEFORE USING	ATTACHMENTS
Street Address			Street Address		·
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City	State	Zip	City	State	Zip
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Director Name			Director Name	.4	l
Street Address			Street Address		
City	T			<u></u>	
·····iA	State	Zιp	City	State	Zip
IO. SHARES AUTHORIZED /	 				
10. SHARES AUTHORIZED (AUTHORIZED SHARES	A BOX FOR ATTAC	CHMENT) [11. SHARES ISSUED ("X"	BOX FOR ATTACHME	Vτ) [
	Class/Series)		ISSUED SHARES		
	Clasosenes /	Par Value	Number of Shares	Class/Series	Par Value
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	-	COMMON			10000
		COMMON			
This report must be si	gned in ink by either	the President, Vice Pre	esident, Secretary, Assistant Se	Cretary Treasurer Rece	eiver or Trustee
				reversity, treasurer, rece	aver or trustee
			11 1		
			including any assemble including any	I declare and affirm that I I	have examined this report
)		equitained herein are true a	ing schedules and statemer	us, and that all statement
File Date			1 ./ A		10.000
	104		Signature of Officer		10.8-04
Check No.	110		Signature of Officer		Date
By <u>53</u>	44 _		MARTIN	D. HARD	15
By:	- C A AA		Print or Type Name of Offic	rer	
FOR SECRETARY OF STAT	E USE ONLY		Yres & d	PNT	
	- 300 ONET	-	Title of Officer	<u> </u>	
					Form 630 Rev. 12/03

Edward S. Inman, III, Secretary of S Corporations Divis 100 North Main Street, Providence, RI 02903-13 401-222-30

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

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 65691 Martin D. Harris, Esquire, Ltd. 3. Street Address Principal Business Office 132 DORRANCE St. 4. Business Phone No. 5. State of Incorporation 6. SIC Code 401-854-2567 RHODE ISLAND 7. Brief Description of the Character of Business Conducted in Rhode Island 7617 LAW OFFICE, ATTORNEY AT LAW 8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS MARTIN D. HARRIS Street Address Street Address 132 DORRANCE St. State ZIp Treasurer Name Elizabeth & Harris DORRANCE St. 9. NAMES AND ADDRESSES OF THE DIRECTORS (*X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Director Name Director Name NIA Street Address Street Address City State Zip City State Zip Director Name Director Name Street Address Street Address City State City State 10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) AUTHORIZED SHARES Number of Shares Class/Series Par Value Number of Shares Class/Series Par Value 100 NO PAR VALUE None

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



Hadaa aa baadaa	
Under penalty of perjury, I declare and affi	irm that I have examined
this report, including any accompanying so	chedules and statements, and
that all statements confined herein are tri	ue and correct
Malin D. Jan	4/8/03
Signature of Officer	Date
MARTIN D. HARRIS	4-4-03
Print or Type Name of Officer	
GresideNT	
Title of Officer	

NONE

Form 630 12/02



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

Edward S. Inman, III, Secretary Corporations Division 100 North Main Street, Providence, RI 02903-132 401-222-304

PROFIT COR Serving Period: Januar	PORATIO	NANNUAL RE	PORT FOR TH	HE YEAR _ 20	002 ST
(FORM MUST BE TYPED IN BL		-			INSTR
1. Corporate II) No.	2. Name of Corp.	oration			
65691	Martin D. I	Harris, Esquire, Ltd.			
3. Street Address Principal Busines	is Office	, , , , , , , , , , , , , , , , , , , ,	City	State	Zip
4. Business Phone No.	RANCe	5. State of Incorporation	Providence		0290
401-273- 7. Brief Description of the Charact LAW FIRV	γ	RHODE ISLAND d in Rhode Island			6. SIC Code 7617
8. NAMES AND ADDRE. President Name	SSES OF THE OF	FICERS (*X* BOX FOR ATTACE	IMENT) FILL IN SPACE Vice President Name	S BEFORE USING ATT	ACHMENTS
Street Address	Harris		Street Address	D. Harris,	£55 ·
CIIY O	RANCE S	Zip	132 D	ORRANG S	
Providence Secretary Name		05903	Treasurer Name	uce R	029E
Street Address	th Ferr	o Havis	A) 6	eth Beri	so Harris
132 Do	RRANCE Stole	_ S + zip	City —	RRANCE	St.
TNOU' DENU	- 4 0 .	ECTORS ("X" BOX FOR ATTAI	in and		, <u>0</u> 960
Director Name		LECTORS (A BOX FOR ATTAI	Director Name	CES BEFORE USING AT	TACHMENTS
Street Address			Street Address		
Cuy	State	Zip	City	State	Zip
Director Name		· · · · · · · · · · · · · · · · · · ·	Director Name	• •	
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10. SHARES AUTHORIZED AUTHORIZED SHARES	D (*X* BOX FOR ATT	(ACHMENT)	11. SHARES ISSUED ("X" BOX FOR ATTACHME	(T)
Number of Shares	Class/Series	Par Value	, Number of Shares	Class/Series	Par Value
100 NO PAR VALUE					, w, , oipt
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This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



File Date:	53-02	
Check No.:	1959	
Ву:	2	
FOR SECRETA	ARY 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.

of Officer

Form 630 12/01

Corporations Divis 100 North Main Street, Providence, RI 02903-1. 401-222-31

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. 65691 3. Street Address Principal Business Office Durane . Business Phone No. Since Oct 1984. Engaged in general Agentifica de 8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Martin Harris O. Martin D Harris Secretary Nam Street Address 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 Zio Zip Director Name Director Name Street Address Street Address City State 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 Por Value Number of Shares Class/Series Par Value 100 NO PAR VALUE Owwar 100 Comm

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



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

ile Date:	0-21-01	ther all statements contained herein are true and correct.	1113
heck No.:	1355	Signature of Officer Date	_
ν·		Print or Type Name of Officer	

Form 630 12/00

2. Name of Corporation

(FORM MUST BE TYPED IN BLACK)

3. Street Address Principal Business Office 132 Dorrance

401.273.4590

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

1. Corporate ID No.

Check No.:

FOR SECRETARY OF STATE USE ONLY

MES R. Langevin, Secretary of Si Corporations Divis

100 North Main Street, Providence, RI 02903-1. 401-222-31

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000 Filing Period: January 1-March 1 • Filing Fee: \$50.00

RHODE ISLAND

Martin D. Harris, Esquire, Ltd.

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8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS President Name ratin D. Marys 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMEN Director Name Director Name Street Address Street Address City State 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 Number of Shares 100 NO PAR VALUE CO mmo N 160 100 Styres No par volve This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Truste-Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and 5/24/00

all statemente contained herein are true and correct.

Title of Officer

Jumes R. Langevin, Secretary of St Corporations Divis. 100 North Main Street, Providence, RI 02903-13 401-277-36

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 99



Filing Period: January 1-March 1 • Filing Fee: \$50.00 (FORM MUST BE TYPED IN BLACK) 1. Corporate ID No. 2. Name of Corporation 0065691 GIARTPN D. HARRIS, 699.41) 3. Street Address Principal Business Office 132 DORRANCE STREET TROUIDENCE.

02903 4. Business Phone No. 6. SIC Code 401-273-4990 HhoDE ISLAND フ6/フ

8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) President Name Vice President Name THRAID D. HARAIS GARTIN D. HARRIS 132 DORRANCE STREET DORRANCE ST. Paovidence 62903 02903 Secretary Name Treasurer Name Street Address MARTIN D. HARRIS Street Address DORRANCE STREET 132 DORRANCE STREET 02903 O3003 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) Director Name Street Address Street Address CIty State Zip City State Director Name Director Name Street Address Street Address City State Zip City State 210 10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ISSUED SHARES

AUTHORIZED SHARES

Number of Shares

100

Class/Series

Par Value

COMMON

Number of Shares

100

Class/Series

Par Value

COMMON

100 Shs NO PAR VALUE

his report must be s igned in ink by either the President, Vio	ce President, Secretary, Assistant Secretary, Trea	asurer, Receiver or Truste
PAID File Date: NOV 0 8 1999 Check No.: SEC'Y OF STATE By:	Under penalty of perjury, I declare and aff this report, including any accompanying s that all statements contained herein are tresponding to the statements of officer DIARTIN D. HARRIS Print or Type Name of Officer	chedules and statements, and



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PL FIDER PORATION ANNUAL REPORT FOR THE YEAR 1998



1. uporare III 2. Name of Corporation Martin D. Harris, Esquire, Ltd. 391 3. She't Addres idpal Business Office Cirv State Zip 12 Dorne Street Providence RI 02903 4. Baness Phon 5. State of Incorporation 6. SIC Code (4**01)** 3-4990 RHODE ISLAND 7. Brif Descripted the Character of Business Conducted in Rhode Island 7617 LEGAL SPICES 8. NAMES AN ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) President Name Vice President Name Mirtin P Harris Martin D. Harris Street Address Street Address 132 Dorrance Street 132 Dorrance Street City State Zip Providence RI 02903 Providence RI 02903 Secretary Name Treasurer Name Martin D. Harris Martin D. Harris Street Address Street Address 132 Dorrance Street 132 Dorrance Street State Zip Providence RI 02903 Providence RI 02903 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) Director Name Director Name Street Address Street Address City State Zip City State ZIP Ofrector 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 Number of Shares Class/Series 100 Par Value Common 100

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

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File Date:	4.27.98
Check No.:	6381
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FOR SECRETARY O	OF STATE USE ONLY

100 SHS NO PAR VALUE

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this report, including any ac	declare and affirm that I have examined companying schedules and statements, and
that all statements contained	herein are true and correct.
(South	L-24-92
Signature of Officer	Date
Martin DK	Jappis
Frint or Type Name of Officer	
Title of Officer	

Common

Corporations Divi.

100 North Main Street, Providence, RI 02903-1

PROFIT CORPORATION ANNUAL REPORT 1997

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.

2. Name of Corporation

0065691

MARTIN D. HARRIS, ESQUIRE LTD.

3. Street Address Principal Business Office

132 DORRANCE STREET

State

RI

7.10 02903

4. Business Phone No.

S. State of Incorporation

(401) 273-4990

RI

6. SIC Code

7. Brief Description of the Character of Rusiness Conducted in Rhode Island LEGAL SERVICES

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

President Name

MARTIN D. HARRIS

Vice President Name

PROVIDENCE

MARTIN D. HARRIS

Street Address

132 DORRANCE STREET

Street Address

132 DORRANCE STREET

Zip

PROVIDENCE

RI

02903

PROVIDENCE

RI

02903

Secretary Name MARTIN D. HARRIS

MARTIN D. HARRIS

Street Address

Treasurer Name

132 DORRANCE STREET

Street Address

132 DORRANCE STREET

PROVIDENCE

State RI

7.10

PROVIDENCE

02903

ZIp

02903

9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) Director Name Director Name

RI

Street Address

Street Address

City

City

State

Zip

Director Name

Street Address

Street Address

City

State

State

ZIp

210

City

State

Zip

10. SHARES AUTHORIZED AND ISSUED ("X" BOX FOR ATTACHMENT)

AUTHORIZED SHARES Number of Shares

Class/Series

Par Value

ESSUED SHARES

Number of Shares

Class/Series

Par Value

100

COMMON

100

COMMON

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

Check No.: 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.

Print or Type Name of Officer

Title of Officer

MINUTES OF ANNUAL MEETING OF SHAREHOLDERS OF MARTIN D. HARRIS, ESQUIRE, LTD.

The annual meeting of the Shareholders for Martin D. Harris, Esquire, Ltd., was held at the Office of Martin D. Harris, Esq., on the 16th day of January, 1996, pursuant to the provisions of the By-Laws of the Corporation.

The President, upon finding all the owners of shares of stock of the Corporation to be present, opened the meeting with his report of the business of the Corporation for the past year and after discussion, thereon, a Motion duly made, seconded and carried, it was unanimously

RESOLVED that the actions taken by the Board of Directors and Officers of the Corporation are hereby ratified; and further

<u>RESOLVED</u> that the Corporation shall indemnify and hold harmless all of the members of the Board of Directors and the Officers of the corporation from any liability for any action taken on their part within the scope of their office; and

 $\underline{\text{VOTED}}$ that the Board of Directors and Officers for the ensuing year shall be:

President Vice-President Secretary Treasurer Martin D. Harris, Esquire Martin D. Harris, Esquire Martin D. Harris, Esquire Martin D. Harris, Esquire;

and further

RESOLVED that the Officers are hereby authorized and empowered to execute the 1996 Annual Report and file the same with the Office of Secretary of State, Department of Corporations; and further

RESOLVED that the Officers and Directors have determined it necessary to change the address of the corporation to 132 Dorrance Street Providence, Rhode Island 02903. The Officers and Directors of the Corporation are hereby authorized to file the necessary documentation with the Rhode Island Secretary of State's Office changing the address of the Corporation to 132 Dorrance Street Providence, Rhode Island 02903.

There being no further business, to come before said meeting, the same was duly adjourned at .

Secretary

Martin D. Harris, Esquire, Ltd.

ATTEST:

The Undersigned, being the sole subscribing holder of capital stock of Martin D. Harris, Esquire, Ltd., does hereby give notice of the date, time and place of the annual meeting of the shareholders held on _____, and hereby ratifies and confirms the actions taken at said meeting without expiration or limitation whatsoever.

Martin B. Harris, Esq.

PROFIT CORPORATON, ANNUAL REPORT



State of Rhode Island and Providence Plantat James R. Langevin, Secretary of State

Corporations Division 100 North Main Street Providence, Rhode Island 02903-1335 * (401) 277-

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

> PLEASE TYPE OR PRINT IN BLACK INK. 2 NAME OF CORPORATION

1. CORPORATE ID NO 0065691

MARTIN D. HARRIS, ESQUIRE LTD.

3 STREET ADDRESS PRINCIPAL BUSINESS OFFICE

132 DORRANCE STREET

PROVIDENCE

STATE

ZIP CODE

4 BUSINESS PHONE NO

5 STATE OF INCORPORATION

RI

02903

(401) 273-4990

RI

3CO0 012 8

7617

CABLE SHOWS IN CATALOGROUP OF BUSINESS CONDUCTED IN AMOUNT STATE TO A SPIRE TO SPIRE

LEGAL SERVICES

8. NAMES ADDRESSES OF THE OFFICERS

PRESIDENT NAME MARTIN D. HARRIS, ESQUIRE

VICE PRESIDENT HAVE MARTIN D. HARRIS

STREET ADDRESS 132 DORRANCE STREET

STREET ADDRESS
132 DORRANCE STREET

PROVIDENCE.

RT

ZIP CODE 02903

PROVIDENCE

STATE

ZIP COOF

SECRETARY NAME
MARTIN D. HARRIS

TREASURER MAYE MARTIN D. HARRIS

02903

STREET ADDRESS 132 DORRANCE STREET

STREET ADDRESS 132 DORRANCE STREET

THE

PROVIDENCE

PROVIDENCE,

DIRECTORS

02903

DIRECTOR NAME

ADDRESSES Û F

DIRECTOR NAME

STREET ADDRESS

STREET ACCRESS

CITY

ZIP CODE

STATE

ZIP CODE

SMAN RC*DBRIG

DIRECTOR NAVE

STREET ADDRESS

STREET ADDRESS

CITY

STATE

STATE

ZIP CODE

STATE

ZIP CODE

SHARES AUTHORIZED ISSUED

AUTHORIZED SHARES

NUMBER OF SHARES

CLASS / SERIES

PAR VALUE

NUMBER OF SHARES

ISSUED SHARES CLASS / SERIES

100

COMMON

NO PAR

100

COMMON

PAR VALUE NO PAR

This report must be SIGNED IN INK by either the

President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

File Date:

By:

Check No:

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

MARTIN D. HARRIS

Print or Type Name of Officer

Date

FCRM 31 12/95

MINUTES OF ANNUAL MEETING OF SHAREHOLDERS OF MARTIN D. HARRIS, ESQUIRE, LTD.

The annual meeting of the Shareholders for Martin D. Harris, Esquire, Ltd., was held at the Office of MA(Tm,D) Herris, on the 15th day of Name 1996, pursuant to the provisions of the By-Laws of the Corporation.

The President, upon finding all the owners of shares of stock of the Corporation to be present, opened the meeting with his report of the business of the Corporation for the past year and after discussion, thereon, a Motion duly made, seconded and carried, it was unanimously

<u>RESOLVED</u> that the actions taken by the Board of Directors and Officers of the Corporation are hereby ratified; and further

<u>RESOLVED</u> that the Corporation shall indemnify and hold harmless all of the members of the Board of Directors and the Officers of the corporation from any liability for any action taken on their part within the scope of their office; and

 $\underline{\text{VOTED}}$ that the Board of Directors and Officers for the ensuing year shall be:

President Vice-President Secretary Treasurer Martin D. Harris, Esquire Martin D. Harris, Esquire Martin D. Harris, Esquire Martin D. Harris, Esquire;

and further

<u>RESOLVED</u> that the Officers are hereby authorized and empowered to execute the 1996 Annual Report and file the same with the Office of Secretary of State, Department of Corporations; and further

RESOLVED that the Officers and Directors have determined it necessary to change the address of the corporation to 132 Dorrance Street Providence, Rhode Island 02903. The Officers and Directors of the Corporation are hereby authorized to file the necessary documentation with the Rhode Island Secretary of State's Office changing the address of the Corporation to 132 Dorrance Street Providence, Rhode Island 02903.

There being no further business, to come before said meeting, the same was duly adjourned at

Secretary Martin D. Harris, Esquire, Ltd.

ATTEST:

The Undersigned, being the sole subscribing holder of capital stock of Martin D. Harris, Esquire, Ltd., does hereby give notice of the date, time and place of the annual meeting of the shareholders held on $\Im \rho \alpha = 1000$, and hereby ratifies and confirms the actions taken at said meeting without expiration or limitation whatsoever.

Martin D. Harris, Esq.

State of Rhode Island and Providence Plantations

Office of The Secretary of State

100 North Main Street

Providence, Rhode Island 02903-1335
401-277-3040

ANNUAL REPO:

Please Type or F File Annually – Jan. 1 - Mari

Filing Fee \$50 Make Checks Payable to: Secretary of S

ALL ENTRIES MUST BE COMPLETED IN FULL OR THE FORM WILL BE RETURNED.

Corporate ID:	0065691	A	nnual Report for	the year: _1995	<u>. </u>
Name of Corporation:	Harris & D'Amb		•	•	
			Position Carin		
Business entity organized under the laws of the State of: Rhode Island For foreign entity, address and telephone number of principal office:			Business Entity	is (check one): Corporation (See RIGL Chap	
				al Service Corporation (See	
	— <u>————————————————————————————————————</u>	·	(,	a. oet vice corporation (Sec	Riod Chapter 7-3.1)
			Brief statement	of the character of business of	conducted in Rhode Island:
Phone: ()			Legal se	rvices	
Address and telephone of	the principal office of business entity	in Rhode		<u> </u>	
Island (Provide street addr Shakespeare	ess - Not P.O. Box); Hall				
132 Dorrance					
Providence,			···		
Phone: (401) 27.	3-4990	-			
					
	THE	NAMES OF THE	OFFICERS AR	EE:	
PRESIDENT		STREET ADDRES	is	CTLYSTATE	ZIP CC
Martin D. Ha	arris, Esquire, 13	2 Dorrance	Street, Pr	rovidence, RI	02903
		21 KEEL ADDKES	3	CTTY/STATE	ZPα
SECRETARY	arris, Esquire, 13	2 Dorrance	Strect, Pi	covidence, RI	02903
		2 LIKEE LYDD KE2	3	CITY/STATE	ZIP CC
TREASURER	arris, Esquire, 13	2 DOTTANCE STREET ADDRESS	Street, Pi	covidence, RI	02903
Martin D. Ha	irris, Esquire, 13	2 Dorrance	s Channa a b	CITY/STATE	ZIP CC
 	THE	NAMES OF THE I	MECTOR A	ovidence, RI	02903
NAME	· · · · · · · · · · · · · · · · · · ·	STREET ADDRES	STRECTORS AT	CITYSTATE	ZPCO
					2 co
NAME		STREET ADDRESS	5	CITY/STATE	ZP CO
					
NAME		STREET ADDRESS	5	CITYSTATE	ZIP CO
					
NUMBER OF SHARES AU	THORIZED (Rider may be attached)	N	UMBER OF SHARE	S ISSUED AND OUTSTAND	ING (Rider may be attached)
Number of Shares 100	Class / Series Commo	n N	umber of Shares 1	00 Class / Series C	'Ommon
				Ciasi / Sciles C	
		i			
May 15	· 	_			
Date		//	MY TW		
	19 95	By:	W (V)	D -2	
		PRINT OR TYPE N	Martin AME OF OFFICER SIGNU		quire
orm 31 1/95		TITLE OF OFFICE		resident	· -
	DESIGNATED REG	ISTERED AGENT	FOR SERVICE	F OF PROCESS	
LEASE NOTE: If the reg	istered office and/or registered age	nt indicated below is is	correct Form 0 =	L. 61-4	

FILED

MAY 0 9 1995

By 0.0#55 145252 Filing Fee \$50.00 Payable to: Secretary of State

PLEASE TYPE or PRINT

State of Rhode Island and Providence Plantations Office of The Secretary of State

File Annually LLLC, Sept. 1 - Nov. 1 CORP: Jan. 1 - March 1

100 North Main Street
Providence, Rhode Island 02903-1335
401-277-3040

Corporate ID: 0000071			the year:		
Name of Business Entity: HARRIS + D'A	MBRO	SIO, LTD	· · · · · · · · · · · · · · · · · · ·		
Business entity organized under the laws of the State of: RHode	±SLA D	Business Entity	is (check one):		
Federal Taxpayer Identification Number		₩ Bus	iness Corporation (See RIGI	. Chapter 7-1	.1)
For foreign entity, address and telephone number of principal office:		{ } Prof	essional Service Corporation ited Liability Company (See	n (See RIGL)	Chapter 7-5.1)
		f	mailing address of contact p		
		communications	may be directed:		
		<u> </u>	ABETH F. AAR	<u> 815, U</u>	Efric Dahad
Phone: ()			orrance St	neet	
		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	idence, RI		
Address and telephone of the principal office of business entity in Rh Island (Provide street address - Not P.O. Box):	ode				
132 DORRance St			of the character of business of the Rhactice		
Providence, RI 02903	- 	<u> Sever</u>	ME THANKICE	<u> 140</u>) (pri i i
		Date of Organiza	ntion:	· · ·	
Phone: (401) 273-4990		1	ation to do business in Rhod	e Jeland (if fo	mina natitu):
FILLING. 27.07.07.07.07.07.07.07.07.07.07.07.07.07		isale di Qualific	otion to do business in Palod	e island (ii ic	neign enuty)
min v.	4110 011 011				
	STREET AD	HE OFFICERS AF	COTYSTATE	 	21F C00E
MARTIN D. HARRIS, CS9. 13	33 Do	RRANCE ST	· <u>Ynovideuce</u>	RI	029 <u>03</u>
CUSTODIAN OF RECORDS OR DESCRETARY (CONT. ON)	//	11	//	11	// 72F CODE
CHIEF FINANCIAL OFFICER OR & TREASURER (ONL)	/ I	11	11		4
MARTIN D. HARRIS, ESS.	И	71	CITYSTATE	(/	7JP CODE
NAME THE NAM	ES OF TH	E DIRECTORS A	RE:		ZIPCOUE
MARtin J. Harris, 639.	130	DO RROMCE	St. 8 nov	R	1 02901
NAME V	STREET ADD	MESS.	तार्ग⁄ङा∧ाह		ZIP CODE
NAME	STREET ADD	ON ESS	CITY/STATE	· · · · · · · · ·	ZJP COOE
NUMBER OF SHARES AUTHORIZED (If Applicable)		NUMBER OF SHA	RES ISSUED AND OUTST	TANDING (II	Applicable)
NUMBER 100 FILE:		NUMBER /00			
CLASS COMMON. JAN 1 3 15	45	CLASS COH	0N		
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PAR VALUE OR NO Pou Value WITHOUT PAR		PAR VALUE OR WITHOUT PAR	po be value		
Date	By:	Pail			
FILED	P1 i	RTIN D.	HARRI		
1	Pres.	sideret			
9y	TRUE OF OF	PICER SIGNING			
Form 31 1/84					
DESIGNATED REGISTERED O	R RESIDE	NT AGENT FOR	SERVICE OF PROCES	S:	

PLEASE NOTE: If the Corporation has changed its registered office and/or registered or resident agent, Form 9 or Form LLC 3 must be filed.

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

Corporate ID		Annual Report for the year	·····
First: The name	of the corporation is	MARTIN D. HARRIS, ESQUIRE L	<u> FD</u> .
SECOND: It is inco	orporated under the laws of	Rhode Island	
THIRD: Character	of business, briefly stated, is	Professional Legal Corporation	•••••
FOURTH: If foreign	n corporation, address of its prin	ncipal office D/N/A	
FIFTH: Business ac	Idress in Rhode Island	128 Dorrance Street, Suite 230	
		Providence, RI 02903	••••
SIXTH: Names and	d addresses of its directors and o	Address (including number, street, zip code)	er if necessary)
Martin D. Harris,	Esquire Director	128 Dorrance Street, Providence,	, RI
	Director		·····
	Director		
Martin D. Harris,	Esquire President	128 Dorrance Street, Providence,	RI
Martin D. Harris,	Esquire Vice Presiden	128 Dorrance Street, Providence,	RI
Martin D. Harris,	Esquire Secretary	128 Dorrance Street, Providence,	RI
Martin D. Harris,	Esquire Treasurer	128 Dorrance Street, Providence,	RI
Seventh: Number	r of Shares authorized:	Par Vatu	:
No. of Shares	Class	or statement shares are will Series par value	ihout
100	Common	no par va	
EiGHTH: Number o	of Shares issued: Roofd & 1	Filed MAR 1 1993 Par Value	:
No. of Shares	Class	or statement shares are will par value	ihout
100	Common	no par val	lue
Dated February 22	19 93	Martin D. Harris, Esquire, Ltd.	
	Ву	. PRESIDENT	
(Report must be	signed by an officer) Tit	lele.	

State of Rhode Island and Providence Plantations CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0055501	***************************************	Annual Report for t	he year 1982		
FIRST: The name of the corporation is		MARIO D. HARRIS, ESQUIRE LID.			
Second: It is incorporated under	er the laws of R	node Island			
THIRD: Character of business, b	riefly stated, isPro	ofessional (Legal Co	rporation)		
FOURTH: If foreign corporation,	address of its princi	pal office			
FIFTH: Business address in Rhoo	de Island 128 Dor	rance Street. Suite	230. Providence, RI		
SIXTH: Names and addresses of	its directors and offi		(Attach rider if necessary) g number, street, zip code)		
Martin D. Harris, Esquire	D'	128 Dorrance Street,	Providence, RI 02903		
	Director				
Martin D. Harris, Esquire	Vice President .		Providence, RI 02903		
	Treasurer .	•••••			
SEVENTH: Number of Shares au No. of Shares 100 Cla		Series	Par Value or statement that shares are without par value No par value		
EIGHTH: Number of Shares issu	11th	ed FEB 2 3 1992 09 05 Series	Par Value or statement that shares are without par value		
	ט'ן, יואק	, v	No par value		
Dated February 1	(Nam	tin D. Harris, Esqui e of Corporation)	s. A & D		
	# By ¹	Martin D. Harris, Es	quire I land		
(Report must be signed by an off	ficer) Title	President	2		