



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 IN BLACK)

1. Corporate ID No. 122794		2. Name of Corporation FrameTech, Inc.			
3. Street Address Principal Business Office P.O. Box 477		City Jamestown	State RI	Zip 02835	
4. Business Phone No. 401-423-0955		5. State of Incorporation Rhode Island		6. SIC Code 8888	
7. Brief Description of the Character of Business Conducted in Rhode Island To Contract for erection, construction, or repair of any building or improvement, public or private and contract construct or repair same.					
8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Jeremy Sherer		Vice President Name Jennifer Zoltners Sherer			
Street Address P.O. Box 477		Street Address P.O. Box 477			
City Jamestown	State RI	Zip 02835	City Jamestown	State RI	Zip 02835
Secretary Name Jeremy Sherer		Treasurer Name Jeremy Sherer			
Street Address Same as above		Street Address Same as above			
City	State	Zip	City	State	Zip
9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Jeremy Sherer		Director Name			
Street Address Same as Above		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) <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
2,000	Comm 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



1 2 2 7 9 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.

Signature of Officer
Jeremy Sherer
Printer Type Name of Officer
President
Title of Officer

Date
3.3/05

FILED
File Date MAR 08 2005
Check No. 1099
By [Signature]
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

1 MUST BE TYPED IN BLACK

1. Corporate ID No. 122794
2. Name of Corporation Frame Tech, Inc.

3. Street Address Principal Business Office
Post Office Box 477

City State Zip
Jamestown RI 02911

4. Business Phone No

5. State of Incorporation
RHODE ISLAND

6. SIC Code

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

To contract for erection, construction, or repair of any building or improvement, public or private and erect construct or repair same.

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

President Name
Jeremy Sherer

Street Address
Post Office Box 477

City State Zip
Jamestown RI 02911

Secretary Name

Jeremy Sherer

Street Address
Same as above

City State Zip

Vice President Name

Jennifer Zoltners Sherer

Street Address
Post Office Box 477

City State Zip
Jamestown RI 02911

Treasurer Name

Jeremy Sherer

Street Address
Same as above

City State Zip

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

Director Name

Jeremy Sherer

Street Address
Same as above

City State Zip

Director Name

Street Address

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 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 2 2 7 9 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.

Signature of Officer

Jeremy Sherer

Print or Type Name of Officer

President

Title of Officer

Date

File Date

Check No.

By

SECRETARY OF STATE USE ONLY

Form 630 (2/01)



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 3640

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003

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

(FORM MUST BE TYPED IN BLACK)

1 Corporate ID No. *122794* 2 Name of Corporation Frame Tech. Inc.
3 Street Address Principal Business Office Four Highland Drive City Jamestown State RI Zip 02911
4 Business Phone No. _____ 5 State of Incorporation RHODE ISLAND 6 SIC Code _____

7 Brief Description of the Character of Business Conducted in Rhode Island
TO CONTRACT FOR ERECTION, CONSTRUCTION, OR REPAIR OF ANY BUILDING, STRUCTURE OR IMPROVEMENT, PUBLIC OR
PRIVATE AND ERECT, CONSTRUCT, OR REPAIR SAME

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

President Name Jeremy Sherer Vice President Name _____
Street Address Four Highland Drive Street Address _____
City Jamestown State RI Zip 02911 City _____ State _____ Zip _____
Secretary Name Jeremy Sherer Treasurer Name Jeremy Sherer
Street Address Four Highland Drive Street Address Four Highland Drive
City Jamestown State RI Zip 02911 City Jamestown State RI Zip 02911

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

Director Name Jeremy Sherer Director Name _____
Street Address Same as above 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
2,000 NO PAR VALUE

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

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

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



* 1 2 2 7 9 4 *

122794 DBC4/5/038:31:27 AM
File Date 4-14-03
Check No. 3032
By: ICP
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.

Jeremy Sherer Date _____
Signature of Officer
Jeremy Sherer
Print or Type Name of Officer
President
Title of Officer