



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

Stephen A. Brown, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1401
401.222.3

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. 62692
2. Name of Corporation WORLD VIEW GRAPHICS, INC.
3. Street Address Principal Business Office 29 CLIFF AVENUE
City NEWPORT State RI Zip 02840
4. Business Phone No. 4018558850
5. State of Incorporation RHODE ISLAND
6. SIC Code 3954
7. Brief Description of the Character of Business Conducted in Rhode Island
RETAIL SALES

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

President Name ANDREW KAGAN Street Address 29 CLIFF AVE City NEWPORT State RI Zip 02840 Secretary Name ROBERT KAGAN Street Address 29 CLIFF AVE City NEWPORT State RI Zip 02840	Vice President Name Street Address City State Zip Treasurer Name Street Address City State Zip
--	---

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

Director Name ANDREW KAGAN Street Address 29 CLIFF AVE City NEWPORT State RI Zip 02840 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) ☐

Number of Shares	Class/Series	Par Value
5,000	COMM	NO PAR VALUE

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

ISSUED SHARES	Number of Shares	Class/Series	Par Value
NONE			

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



6 2 6 9 2

FILED

62692 DBC 03/24/05 09:55:48 AM

File Date

APR 25 2005

Check No.

By

8638

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.

Signature of Officer

ANDREW KAGAN

Print or Type Name of Officer

PRESIDENT

Title of Officer

Date

3/24/05



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 62692
2. Name of Corporation WORLD VIEW GRAPHICS, INC.
3. Street Address Principal Business Office 29 CLIFF AVENUE
City NEWPORT State RI Zip 02840
4. Business Phone No. (401)8418850
5. State of Incorporation RHODE ISLAND
6. SIC Code 3954
7. Brief Description of the Character of Business Conducted in Rhode Island
RETAIL SALES

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

President Name ANDREW KAGAN
Vice President Name
Street Address Street Address
29 CLIFF AVE
City NEWPORT State RI Zip 02840
Secretary Name ROBERT KAGAN
Treasurer Name
Street Address Street Address
29 CLIFF AVE
City NEWPORT State RI Zip 02840

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

Director Name ANDREW KAGAN
Director Name
Street Address Street Address
29 CLIFF AVE
City NEWPORT State RI Zip 02840
Director Name
Street Address
City State Zip

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

AUTHORIZED SHARES
Number of Shares Class/Series Par Value

5,000 COMM NO PAR VALUE

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

ISSUED SHARES
Number of Shares Class/Series Par Value

NONE

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



6 2 6 9 2

62692 DBC 09/08/04 12:56:58 PM

File Date

Check No.

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

ANDREW KAGAN

Print or Type Name of Officer

PRESIDENT

Title of Officer

8/7/04
Date

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.

62692

2. Name of Corporation

WORLD VIEW GRAPHICS, INC.

3. Street Address Principal Business Office

29 CLIFF AVE

City

NEWPORT

State

RI

Zip

02840

4. Business Phone No.

(401) 841-8850

5. State of Incorporation

RHODE ISLAND

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

RETAIL/REAL ESTATE

3954

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

FILL IN SPACES BEFORE USING ATTACHMENTS

President Name

Vice President Name

ANDREW KAGAN

Street Address

Street Address

29 CLIFF AVE

City

State

Zip

NEWPORT RI 02840

Secretary Name

City

State

Zip

ROBERT KAGAN

Street Address

Treasurer Name

Street Address

29 CLIFF AVE

City

State

Zip

NEWPORT RI 02840

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

FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

Director Name

ANDREW KAGAN

Street Address

Street Address

29 CLIFF AVE

City

State

Zip

NEWPORT RI 02840

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

5,000 COMM NO PAR VALUE

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

ISSUED SHARES

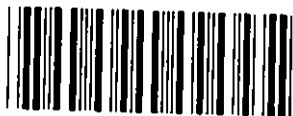
Number of Shares

Class/Series

Par Value

NONE

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



* 6 2 6 9 2 *

File Date: 5-14-03

Check No.: 7731

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: 5/28/03

Print or Type Name of Officer: ANDREW M. KAGAN

Title of Officer: PRESIDENT



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. **62692** 2. Name of Corporation **WORLD VIEW GRAPHICS, INC.**

3. Street Address Principal Business Office

29 CLIFF AVE

City

NEWPORT

State

RI

Zip

02840

4. Business Phone No.

401-848-7913

5. State of Incorporation

RHODE ISLAND

6. SIC Code

3954

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

SCREENPRINTING / PROP MGMT

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

President Name

ANDREW M. KAGAN

Vice President Name

Street Address

29 CLIFF AVE

Street Address

City

NEWPORT

State

RI

Zip

02840

City

State

Zip

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

ANDREW KAGAN

Director Name

Street Address

29 CLIFF AVE

Street Address

City

NEWPORT

State

RI

Zip

02840

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

5,000 COMM NO PAR VALUE

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

ISSUED SHARES

Number of Shares

Class/Series

Par Value

NONE

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



* 6 2 6 9 2 *

File Date:

6.4.02

Check No.:

6979

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

ANDREW M. KAGAN

Date

2/20/02

Print or Type Name of Officer

PRESIDENT

Title of Officer

5

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. **62692** 2. Name of Corporation **WORLD VIEW GRAPHICS, INC.**

3. Street Address Principal Business Office

29 CLIFF AVE

City

NEWPORT

State

RI

Zip

02840

4. Business Phone No.

401-841-8850

5. State of Incorporation
RHODE ISLAND

6. SIC Code
3954

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

RETAIL SALES

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

President Name

ANDREW KAGAN

Vice President Name

Street Address

29 CLIFF AVE

Street Address

City

NEWPORT

State

RI

Zip

02840

City

State

Zip

Secretary Name

ROBERT KAGAN

Treasurer Name

Street Address

HC 61 BOX 266

Street Address

City

FOGARTOWN

State

MA

Zip

02539

City

State

Zip

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

Director Name

ANDREW KAGAN

Director Name

Street Address

29 CLIFF AVE

Street Address

City

NEWPORT

State

RI

Zip

02840

City

State

Zip

Director Name

Street Address

Director Name

Street Address

City

State

Zip

City

State

Zip

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

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

5,000 SHS COM NO PAR VAL

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

ISSUED SHARES

Number of Shares

Class/Series

Par Value

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



* 6 2 6 9 2 *

File Date: 11-13-01

Check No.: 6834

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

Date

Print or Type Name of Officer

Title of Officer



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

James G. Longenech, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1
401-222-3

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. **62692**

2. Name of Corporation **WORLD VIEW GRAPHICS, INC.**

3. Street Address Principal Business Office

15 Vernon Ave

City **Newport**

State **RI**

Zip **02840**

4. Business Phone No.

401 841 8850

5. State of Incorporation
RHODE ISLAND

6. SIC Code
3954

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

RETAIL CLOTHING

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

FILL IN SPACES BEFORE USING ATTACHMENTS

President Name

Andrew Kagan

Street Address

29 Cliff Ave

City

Newport

State

RI

Zip

02840

Secretary Name

Robert Kagan

Street Address

HC 61 Box 266

City

Edgartown

State

MA

Zip

02539

Vice President Name

Robert T Kagan

Street Address

HC 61 Box 266

City

Edgartown

State

MA

Zip

02539

Treasurer Name

Andrew M Kagan

Street Address

29 Cliff Ave

City

Newport

State

RI

Zip

02840

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

FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

Andrew M Kagan

Street Address

same as above

City

State

Zip

Director Name

Robert T Kagan

Street Address

same as above

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

5,000 SHS COM NO PAR VAL

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

ISSUED SHARES

Number of Shares

Class/Series

Par Value

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



* 6 2 6 9 2 *

File Date:

3-1-00 4/14/00

Check No.:

1288

By:

UP

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

Robert T Kagan

Date

Print or Type Name of Officer

Title of Officer

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR **1999**

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.

62692

2. Name of Corporation

WORLD VIEW GRAPHICS, INC.

3. Street Address Principal Business Office

15 VERNON AVENUE SUITE 4

City

NEWPORT

State

RI

Zip

02840

4. Business Phone No.

(401) 841-8850

5. State of Incorporation

RHODE ISLAND

6. SIC Code

3954

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

RETAIL CLOTHING

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

FILL IN SPACES BEFORE USING ATTACHMENTS

President Name

ANDREW KAGAN

Street Address

29 CLIFF AVE

City

NEWPORT

State

RI

Zip

02840

Vice President Name

ROBERT KAGAN

Street Address

HC 61 Box 266

City

EDGARTOWN

State

MA

Zip

02539

Secretary Name

ROBERT KAGAN

Street Address

HC 61, Box 266

City

EDGARTOWN

State

MA

Zip

02539

Treasurer Name

Street Address

City

State

Zip

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

FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

ANDREW KAGAN

Street Address

29 CLIFF AVE

City

NEWPORT

State

RI

Zip

02840

Director Name

Street Address

City

State

Zip

Director Name

ROBERT KAGAN

Street Address

HC 61, Box 266

City

EDGARTOWN

State

MA

Zip

02539

Director Name

Street Address

City

State

Zip

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

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

5,000 SHS COM NO PAR VAL

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

ISSUED SHARES

Number of Shares

Class/Series

Par Value

0

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



* 6 2 6 9 2 *

File Date:

May 22, 1999

Check No.:

1011

By:

AK

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

ANDREW KAGAN

Print or Type Name of Officer

PRESIDENT

Title of Officer

2/27/99

Date



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 02903-133
401-277-304



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. 022692 2. Name of Corporation

WORLD VIEW Graphics, Inc.

3. Street Address Principal Business Office

15 Vernon Ave Unit 4 City Newport State RI Zip 02840

4. Business Phone No.

401 841 8850 5. State of Incorporation RI

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

RETAIL CLOTHING

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

President Name

Andrew M Kagan

Street Address

29 Cliff Ave

City

Newport State RI Zip 02840

Secretary Name

Robert Kagan

Street Address

City

State

Zip

Vice President Name

Robert Kagan

Street Address

HC 61 Box 266

City

Edgartown State MA Zip 02539

Treasurer Name

Robert Kagan

Street Address

City

State

Zip

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

Director Name

Andrew M Kagan (See Above)

Street Address

City

State

Zip

Director Name

Robert Kagan (See Above)

Street Address

City

State

Zip

Director Name

Gerald A Kagan

Street Address

7128 Duval St

City

Key West FL State FL Zip 33040

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

AUTHORIZED SHARES

Number of Shares

5000

Class/Series

1 class only
1 vote per share
Common

Par Value

NO PAR

ISSUED SHARES

Number of Shares

5000

Class/Series

1 class only
1 vote per share

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: 5/22/97 77 10/1

Check No.: 184014

By: KID

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

Robert T. Kagan

Print or Type Name of Officer

Title of Officer

Date

PROFIT CORPORATION ANNUAL REPORT

1998



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) 277-30

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

PLEASE TYPE OR PRINT IN BLACK INK.

1. CORPORATE ID NO. 62692
2. NAME OF CORPORATION WORLD VIEW GRAPHICS, INC.
3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE 15 Vernon Ave
CITY Newport STATE RI ZIP CODE 02840
4. BUSINESS PHONE NO. 401 841 8850
5. STATE OF INCORPORATION RHODE ISLAND
6. SIC CODE 3954
7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND Create, manufacture & sell hand painted clothing.

8. NAMES AND ADDRESSES OF THE OFFICERS
PRESIDENT NAME Andrew M KAGAN
STREET ADDRESS 29 Cliff Ave
CITY Newport STATE RI ZIP CODE 02840
VICE PRESIDENT NAME Robert T KAGAN
STREET ADDRESS
CITY STATE ZIP CODE
SECRETARY NAME Robert T KAGAN
STREET ADDRESS HC 61 Box 266
CITY Edgartown STATE MA ZIP CODE 02539
TREASURER NAME Andrew M KAGAN
STREET ADDRESS
CITY STATE ZIP CODE

9. NAMES AND ADDRESSES OF THE DIRECTORS
DIRECTOR NAME Andrew M KAGAN
STREET ADDRESS Same
CITY STATE ZIP CODE
DIRECTOR NAME Gerald A. KAGAN
STREET ADDRESS 404 Thames St
CITY Newport STATE RI ZIP CODE 02840
DIRECTOR NAME Robert T KAGAN
STREET ADDRESS Same
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
5,000 SHS COM NO PAR VAL			5000	Common	0

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.

File Date: 1/23/96
Check No: 6659
By: [Signature]
For Secretary of State Use Only

Signature of Officer [Signature]
Print or Type Name of Officer ROBERT T KAGAN, VP
Title of Officer V.P.
Date 1-10-96

DETACH BOTTOM BEFORE RETURNING

FORM 31 12/95



ANNUAL REPORT

Please Type or Print
File Annually - Jan. 1 - March
Filing Fee \$50.00

Make Checks Payable to: Secretary of State

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

Corporate ID: 0062692

Annual Report for the year: 1995

Name of Corporation: WORLD VIEW GRAPHICS, INC.

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):

☒ Business Corporation (See RIGL Chapter 7-1.1)

☐ Professional Service Corporation (See RIGL Chapter 7-5.1)

Phone: (401) 841-8850

Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):

15 VERNON AVENUE
NEWPORT, RI 02840

Phone: (401) 841-8850

Brief statement of the character of business conducted in Rhode Island:

RETAIL - HAND PAINTED CLOTHING

THE NAMES OF THE OFFICERS ARE:

	STREET ADDRESS	CITY/STATE	ZIP CODE
PRESIDENT ANDREW M. KAGAN	404 THAMES ST	NEWPORT, RI	02840
VICE PRESIDENT ROBERT T. KAGAN	404 THAMES ST	NEWPORT, RI	02840
SECRETARY ROBERT T. KAGAN	404 THAMES ST	NEWPORT, RI	02840
TREASURER ROBERT T. KAGAN	404 THAMES ST	NEWPORT, RI	02840

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
ANDREW M. KAGAN, DIRECTOR	404 THAMES ST	NEWPORT, RI	02840
ROBERT T. KAGAN, DIRECTOR	404 THAMES ST	NEWPORT, RI	02840

NUMBER OF SHARES AUTHORIZED (Rider may be attached)

Number of Shares: 5000
Class / Series: COM/NO PAR VAL

NUMBER OF SHARES ISSUED AND OUTSTANDING (Rider may be attached)

Number of Shares: _____
Class / Series: _____

Date: JANUARY 15, 1995

By:

ANDREW M. KAGAN
PRESIDENT

Form 31 1/95

DESIGNATED REGISTERED AGENT FOR SERVICE OF PROCESS:

PLEASE NOTE: If the registered office and/or registered agent indicated below is incorrect, Form 9 must be filed.

ANDREW M. KAGAN
11 CHRISTIES LANDING
NEWPORT RI 02840

FILED

MAR 14 1995

By: CE-1760

PLEASE TYPE OR PRINT
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

File Annually
LIC Sept. 1 - Nov. 1
CORP Jan. 1 - March 1

Corporate ID: 0062692 Annual Report for the year: 1994

Name of Business Entity: WORLD VIEW GRAPHICS

Business entity organized under the laws of the State of: RI

Federal Taxpayer Identification Number: [REDACTED]

For foreign entity, address and telephone number of principal office:

Phone: [REDACTED]

Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):

11 CHRISTIES LANDING
Newport RI 02840

Phone: 401 841 8850

Business Entity is (check one)

- ☒ Business Corporation (See RIGL Chapter 7-1.1)
☐ Professional Service Corporation (See RIGL Chapter 7-5.1)
☐ Limited Liability Company (See RIGL 7-16)

Name, title and mailing address of contact person to whom communications may be directed:

Andrew M. Kagan, President
c/o World View Graphics
11 Christies Landing
Newport RI 02840

Brief statement of the character of business conducted in Rhode Island:

RETAIL SELLER OF HAND PRINTED CLOTHING

Date of Organization: 11/19/91 RI (1986 CT)

Date of Qualification to do business in Rhode Island (if foreign entity):

THE NAMES OF THE OFFICERS ARE:

OFFICER	NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
CHIEF EXECUTIVE OFFICER (OR PRESIDENT)	Andrew M. Kagan	404 Thames ST	Newport RI	02840
CHIEF FINANCIAL OFFICER (OR TREASURER)	Robert T. Kagan	404 Thames ST	Newport RI	02840
CHIEF OPERATING OFFICER (OR SECRETARY)	Robert T. Kagan	404 Thames ST	Newport RI	02840
CHIEF LEGAL OFFICER (OR ATTORNEY)	Robert T. Kagan (Same as above)			

THE NAMES OF THE DIRECTORS ARE:

DIRECTOR	NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
	Robert Kagan	404 Thames ST	Newport RI	02840
	Andrew Kagan			
	Gerald Kagan			

NUMBER OF SHARES AUTHORIZED (If Applicable)

NUMBER 50000

CLASS Common

SERIES

PAR VALUE OR WITHOUT PAR \$

NUMBER OF SHARES ISSUED AND OUTSTANDING (If Applicable)

NUMBER 50000

CLASS Common

SERIES

PAR VALUE OR WITHOUT PAR \$

Date: 1/25/94

By: Robert Kagan VP

PRINTED (or NAME OF OFFER ORIGINATOR)

TITLE OF OFFICER SIGNING

Form 31 1/94

DESIGNATED REGISTERED OR RESIDENT AGENT FOR SERVICE OF PROCESS:

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

ANDREW M. KAGAN
11 CHRISTIES LANDING
NEWPORT RI 02840

FILED
FEB 22 1994
BY AC 5792

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0052652 Annual Report for the year 1993

FIRST: The name of the corporation is WORLD VIEW GRAPHICS

SECOND: It is incorporated under the laws of RHODE ISLAND

THIRD: Character of business, briefly stated, is RETAIL CLOTHING

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 11 CHRISTIES LANDING, NEWPORT, RI 02840

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
<u>ANDREW KAGAN</u>	Director	<u>404 THAMES ST NEWPORT RI 02840</u>
<u>ROBERT KAGAN</u>	Director	<u>404 THAMES ST NEWPORT RI 02840</u>
	Director	
<u>ANDREW KAGAN</u>	President	<u>404 THAMES ST NEWPORT RI 02840</u>
<u>ROBERT KAGAN</u>	Vice President	<u>404 THAMES ST NEWPORT RI 02840</u>
<u>ROBERT KAGAN</u>	Secretary	<u>404 THAMES ST NEWPORT RI 02840</u>
	Treasurer	

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series
<u>5000</u>		

Par Value
or statement that
shares are without
par value

NO PAR COMMON
VALUE

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series

Par Value
or statement that
shares are without
par value

Rec'd & Filed FEB 17 1993
Check # 4738
920

Dated 1/29 19 93

World View Graphics
(Name of Corporation)

By [Signature]

Title PRESIDENT

(Report must be signed by an officer)

Filing Fee \$50.00 -

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0002592

Annual Report for the year 1992

FIRST: The name of the corporation is ~~WATKINS SPORTSWEAR, INC.~~

World View Graphics (changed name 11/92)

SECOND: It is incorporated under the laws of RHODE ISLAND

THIRD: Character of business, briefly stated, is RETAIL CLOTHING

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 11 CHRISTIES LANDING, NEWPORT, RI 02840

SIXTH: Names and addresses of its directors and officers:

(Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
<u>ANDREW KAGAN</u>	Director	<u>404 THAMES ST NEWPORT RI 02840 #3</u>
<u>ROBERT KAGAN</u>	Director	<u>404 THAMES ST NEWPORT RI 02840 #2</u>
	Director	
<u>ANDREW KAGAN</u>	President	<u>404 THAMES ST NEWPORT RI 02840 #3</u>
<u>ROBERT KAGAN</u>	Vice President	<u>404 THAMES ST NEWPORT RI 02840 #2</u>
<u>ROBERT KAGAN</u>	Secretary	<u>404 THAMES ST NEWPORT RI 02840</u>
	Treasurer	

SEVENTH: Number of Shares authorized:

No. of Shares
5000

Class

Series

Par Value
or statement that
shares are without
par value

NO PAR COMMON
VALUE

EIGHTH: Number of Shares issued:

No. of Shares

Class

Series

Par Value
or statement that
shares are without
par value

REC'D & FILED

FEB 19 1992

AMT 176319

Dated FEBRUARY 1 19 92

World View Graphics
(Name of Corporation)

By Amfj ANDREW M. KAGAN

Title President PRESIDENT

(Report must be signed by an officer)