

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

Form 630 Rev. 12/03

ROFIT CORPORATION ANNUAL REPORT FOR THE YEAR	2005
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Filing Period: January (FORM MUST BE TYPED OR		Filing Fee: \$50.00			
1. Corporate ID No.	2. Name of Corp	oration		<u> </u>	
1396	ARTISTIC	LABEL COMPANY, INC.			
3. Street Address Principal Bus	stness Office		Cuy	State	Zip
60 Gilbane Stre	<u>eet</u>	<u> </u>	Warwick	RI	02886
4. Business Phone No		5. State of Incorporat	tton		6. SIC Code
(401) 737-0666 7. Brief Description of the Char	ractor of Business Condu-	RHODE ISLA	ND		851
MANUFACTURING	OF LABELS	ati in Room isana			
3. NAMES AND ADDRE	SSES OF THE OFFI	CERS: ("X" BOX FOR A		IN SPACES BEFORE USI	NG ATTACHMENTS
	_		Vice President Name		
Ellen M. Kaplar	1		Same Source Address	<u> </u>	
766 Slocum Road	3		Singi Address		
City	State	Zip	Gity	State	Zip
Saunderstown	RI	02874	*		1
ecretary Name	•••••••••••••••••••••••••••••••••••••••	······································	Treasurer Name	·····	
Same			Same		
treet Address			Street Address		
Tity	State	1910			
")	state	Zip	City	State	Zip
. NAMES AND ADDRES	l SSES OF THE DIRE	 CTORS: <i>("X" ROX FOR</i>	ATTACHMENT) FILE	 . IN SPACES BEFORE U	EINC ATTACHMENTS
rector Name			Director Name	. IN SPACES BEFORE U.	SING ATTACRMENTS
llen M. Kaplan			Nelson A. Kap	lan	
net Address	 		Street Address		
766 Slocum Road			60 Gilbane Sti	reet	
ĭty	State	Zip	City	State	Zip
Saunderstown	JRI	J0287.4	Warwick	lri	l02886
THE CHAPTER			Director Name	•	
invi Address			Street Address		
uy	State	ZФ	City	State	Zip
0. SHARES AUTHORIZ	ED ("X" BOX FOR	ATTACHMENT)	11. SHARES ISSUED	("X" BOX FOR ATTAC	HMENT) 🗍
UTHORIZED SHARES			ISSUED SHARES	· · · · · · · · · · · · · · · · · · ·	
onber of Shares	Class/Series	Par Value	Number of Shares	Gass/Sertes	Par Valuo
1,000 COMM NO PAR \	VALUE				
				common	no par
This report must	he signed in ink by	either the President Vic	ce President, Secretary, Assis		<u> </u>
	or ingited in this by	cities the resident, the	ic resident, Secretary, Assi:	stant Secretary, Treasurer	, Receiver or Trustee
11					
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			Hodor populty of	parium: I declare had office	that I have examined this re-
			including any acc	opponying schedules and st	atements, and that all statem
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ile Date	805		\ //	1/0 m // /-	Histor
\sim \sim \sim	~ OI		Signature of Office		Date
Theck No 2 Y	286			/ "	
y:	/)A		Ellen M. Print or Type Name	Kaplan of Officer	
·	<u> </u>				
FOR SECRETARY O	F STATE USE ONLY		President Tide of Officer	<u> </u>	
			ance of cylicer		



FOR SECRETARY OF STATE USE ONLY

Corporations Division 100 North Main Street Providence, RI 02903-1335 401.222.3040

Filing Period: January 1 - (FORM MUST BE TYPED OR PR		Filing Fee: \$50.00			
1. Gorpomic ID No. 1396	2. Name of Con	Coration LABEL COMPANY, INC.		<u> </u>	<u> </u>
3. Street Address Principal Busines.	Office		City	State	Zip
60 Gilbane St	reet		Warwick	RI	02886
4. Business Phone No.		5. State of Incorporation	117		6. SIC Cixte
(401) 737-0666	<u>_</u>	RHODE ISLAN	<u> </u>		851
7 Brief Description of the Characte MANUFACTURING OF	r of Business Conduc LABELS	cted in Rhode Island			
8. NAMES AND ADDRESSE President Name	S OF THE OFFI	CERS: ("X" BOX FOR AT	TACHMENT) [FILL 1	IN SPACES BEFORE USI	NG ATTACHMENTS
Ellen M. Kaplan	n		Same		
Street Address			Street Address		
766 Slocum Road			Siret Maares		
City	State	Zip	City	State	Zip
Saunderstown	RI	02874			
Secretary Name			Treasurer Name		
Same Street Address	<u> </u>		Same	<u> </u>	<u> </u>
Siren Address			Street Address		
City	State	Zip	City	State	Zip
Director Name Ellen M. Kaplar Street Address	-		Director Name Nelson A K Street Address	IN SPACES BEFORE US	
766 Slocum Road	<u> </u>		60 Gilbane	Street	
City	State	Zip	City	State	Zıp
Saunderstown	JRI	02874	Warwick	RI	02886
Director Name			Director Name		
Street Address			Street Address		
Cuy	State	Zip	City	State	Zip
10. SHARES AUTHORIZED AUTHORIZED SHARES			ISSUED SHARES	("X" BOX FOR ATTAC	
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Sertes	Par Value
1,000 COMM NO PAR VAL	UE ——-		700	common	no par
This report must be	signed in ink b	y either the President, Vice	President, Secretary, Assi	stant Secretary, Treasurer	. Receiver or Trustee
			including any acc	bippanying schedules and st	that I have examined this repo atements, and that all statemen
File Date	17/04		Signature of Office	ard true and correct.	2/13/14

Ellen M. Kaplan
Print or Type Name of Officer

President

Title of Officer

2. Name of Corporation

1. Corporate ID No.

Edward S. Inman, III, Secretary of State Corporations Division 100 North Main Screet, Providence, RI 02903-1335

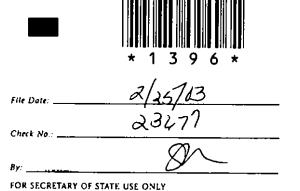
401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR _

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

1. Stert Address Principal Business Office City Stete City Stete City Stete City Stete City O2886 2. Stete of Incorposation RHODE ISLAND RHODE ISLAND RHODE ISLAND RHODE ISLAND RHODE ISLAND RHODE ISLAND RHODE SEARCH OF Reliables's Conducted in Rhode Island Manufacturing of labels and other lawful purposes 3. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) PILL IN SPACES BEFORE USING ATTACHMENTS Vice President Name Ellen M. Kaplan Same Street Address The Same Street Address Same Street Address Same Street Address S	1396	ARTISTIC LAB	EL COMPANY, INC.			
I. Besimers Phone No.	3. Street Address Principal Business (Office	•	City	State	Zip
Manufacturing of labels and other lawful purposes 8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Vice President Name Ellen M. Kaplan Same Street Address 766 Slocum Road City State Zip City State Zip Saunderstown RI 02874 City State Zip Same Street Address 1. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Newton Name Ellen M. Kaplan Same Same Street Address 1. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Director Name Ellen M. Kaplan Street Address 1. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Director Name Ellen M. Kaplan Street Address 1. Nelson A. Kaplan Street Address 60 Gilbane Street City State Zip Saunderstown RI 02874 Warwick RI 02886 Director Name Street Address 1. Shares ISSUED ("X" BOX FOR ATTACHMENT) UNHORDZOD POWANS Unthorpy DIAMES Unthorpy DIAMES Class/Streets For Value 1. OOO COMM NO PAR VALUE	60 Gilbane Str 6. Business Phone No.	reet	5. State of Incorporation	Warwick	RI	
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Director Name Ellen M. Kaplan Street Address 766 Slocum Road Ity State Zip State Zip Saunderstown RI 02874 Warwick Director Name Warwick Director Name Street Address Street Address Tipe City State Zip O. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT) UTHORIZED SHARES Limber of Shares Class/Series Par Value 1,000 COMM NO PAR VALUE	Hty	State	Zip	City	State	Zip
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Saunderstown RI 02874 Warwick RI 02886 Director Name Street Address Street Address Street Address Street Address 11. SHARES ISSUED (*X* BOX FOR ATTACHMENT) UTHORIZED SHARES Umber of Shares Class/Series Par Value 1,000 COMM NO PAR VALUE		ı			aplan	
Director Name Street Address Street Address City State Zip O. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) UTHORIZED SHARES UTHORIZED			Zip			Zip
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1,000 COMM NO PAR VALUE		("X" BOX FOR ATTACH	MENT)		(*X* BOX FOR ATTACHMENT)	• ••
	umber of Shares	Class/Series	Par Value	Number of Shares	Class/Serles	Par Value
-	1,000 COMM NO PAR VALL	JE		700	common	No Par
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This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



Under penalty of parjury, I declare and affirm that I have examined this report facilities any accompanying schedules and statements, and that all statements contained herein are true and correct. Ellen M. Kaplan
Print or Type Name of Officer

President. Title of Officer **4**⊋ 5 Ferni 630 12/02



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 I-March 1 • Filing Fee: \$50.00 (FORM MUST BE TYPED IN BLACK) 1. Corporate ID No. 2. Name of Corporation 1396 ARTISTIC LABEL COMPANY, INC. 3. Street Address Principal Business Office City Zip 60 Gilbane Street Warwick RI 02886 6. SIC Code 5. State of Incorporation **RHODE ISLAND** 851 (401) 737-0666 7. Brief Description of the Character of Business Conducted in Rhode Island Manufacturing of labels and other lawful purposes 8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS President Name Vice President Name Ellen M. Kaplan Same Street Address Street Address 766 Slocum Road State 2,10 City State Zip RI Saunderstown 02874 Secretary Name Treasurer Name Same Same Street Address Street Address State Zio City State Zip 9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Director Name Director Name Ellen M. Kaplan Nelson A. Kaplan Street Address Street Address 766 Slocum Road 60 Gilbane Street State Zip City State ZipSaunderstown RI 02874 Warwick ... RI 02886 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 Class/Series Par Value 1,000 COMM NO PAR VALUE 700 common No Par

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



File Date:	2-11-02	
Check No.:	23-203	
By:	2	

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Under penalty of perjury, I declard and affirm that I have examined this report, influding any accompanying schedules and statements, and that all statements contained herein are true and correct.

Date

<u>Ellen M. Kaplan</u> Print or Type Name of Officer

President

Signature of Officer

Title of Officer



Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

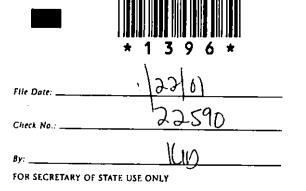
PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001

PLEASE READ INSTRUCTIONS

Filing Period: January 1-March 1	•	Filing Fee: \$50.00	_	
(FORM MUST BE TYPED IN RLACK)				

	ARTISTIC	^{ation} Label Company, in	С.		
3. Street Address Principal Business		-	City	State	Zip
60 Gilbane Stree	t	5. State of Incorporation	Warwick	RI	02886 6. SIC Code
(401) 737-0666		RHODE ISLAND			851
. Brief Description of the Character					
Manufacturing of	labels and	other lawful purpos	ses		
B. NAMES AND ADDRESS tresident Name	SES OF THE OFF	ICERS ("X" BOX FOR ATTACHN	IENT) FILL IN SPACES B	EFORE USING ATTAC	CHMENTS
Ellen M. Kaplan			Same		
treet Address			Street Address		
766 Slocum Road					
lity	State	Zip	City	State	Zip .
Saunderstown	RI	02874	,		2.10
ecretary Name			Treasurer Name	•	* • ·
Same [*]			Same		
treet Addréss			Street Address		
ity	State	Zip	City	State	Zip -
	SES OF THE DIR	ECTORS ("X" BOX FOR ATTAC	HMENT) FILL IN SPACES	BEFORE USING ATT	ACHMENTS
Irector Name			Director Name		
Ellen M. Kaplan			Nelson A. Kaplar	1	•
reet Address			Street Address	•	
766 Slocum Road		•	60 Gilbane Stree	et.	
lty	State	Zip	City	State	Zip
Saunderstown	RI	02874	Warwick	RI	02886
irector Name				•••	11/000
			Director Name		02000
reet Address			Director Name Street Address		. 02000,
	State	Zip		State	U2000,
reet Address ity D. SHARES AUTHORIZED		·	Street Address . City		Zip
lty		·	Street Address		Zip
D. SHARES AUTHORIZED		·	Street Address City 11. SHARES ISSUED (*X		Zip

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



Under penalty of penury, 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

Ellen M. Kaplan

Print or Type Name of Officer

Title of Officer



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 2000

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

FORM MUST-BE	TYPED	IN	BLACK)
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1. Corporate ID No.

2. Name of Corporation

139	O

ARTISTIC LABEL COMPANY, INC.

3. Street Address	Principal	Business	Office
60 Gilbano	o Stro	3 +	

State RI Zip 02886

4. Business Phone No.

5 State of Incorporation

6. SIC Code

(401) 737-0666

RHODE ISLAND

851

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

Manufacturing of labels and other lawful purpose

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

President Name

Ellen M. Kaplan

Street Address

Same

Street Address

Vice President Name

Warwick

766 Slooum Road

City

State

State

Zip

Saunderstown RI

02874

Treasurer Name

Secretary Name

Same Street Address

State

Zip

Same Street Address

City

ZIp

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

Director Name

CITY

Ellen M. Kaplan

Street Address

766 Slocum

City

Saunderstown Director Name

RI

Zio

02874

60 Gilbane Street City

Warwick

Director Name

Street Address

Nelson A. Kaplan

Director Name

RI

State

Zio

02886

Street Address

City

Street Address

State

Zio

City

State

Zip

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

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

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

ESSUEED SHARES Number of Shares

Class/Series

Par Value

1,000 COMM NO PAR VALUE

FOR SECRETARY OF STATE USE ONLY

700

Common

No par

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



polyuly, I declare and affirm that I have examined this report, the liding any accompanying schedules and statements, and that all statements contained herein are true and correct. Signature of Office Ellen Na Kaolan Print or Type Name of Officer President Title of Officer



James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040

401-222-3040 PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR Filling Period: January 1-March 1 Filing Fee: \$50.00 1999 (FORM MUST BE TYPED IN BLACK) 1. Corporate ID No. 2. Name of Corporation 3. Sizeet Address Principal Business Office ARTISTIC LABEL COMPANY, INC. State 7.1p 60 Gilbane Street Warwick RI 02886 4. Business Phone No. 5. State of Incorporation 737-0666 7. Brief Description of the Character of Business Conducted in Rhode Islando RHODE ISLAND 851 Manufacturing of labels and any other lawful purpose 8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) F FILL IN SPACES BEFORE USING ATTACHMENTS President Name Vice President Name Ellen M. Kaplan Ellen M. Kaplan Street Address Street Address 766 Slocum Road Same Zip Zip Saunderstown RI 02874 · Secretary Name Treasurer Name Ellen M. Kaplan Ellen M. Kaplan Street Address Street Address Same Same State Zip State Zip 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENT Director Name Ellen M. Kaplan Nelson A. Kaplan Street Address 766 Slocum Road 60 Gilbane Street City Zip City Zip Saunderstown RI 02874 Warwick Director Name Director Name Street Address Street Address City State Zio City State Žip 10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT) 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) AUTHORIZZZO SHARES ESSUEE) SHARES Number of Shares Class/Series Par Value 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

700

File Date: .	1 15 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Check No.:	21120
Ву:	AMF
FOR SECRE	ETARY OF STATE USE ONLY

1,000 COMM NO PAR VALUE

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all aracyperits contained herein are true and correct.

Signature of Officer

Print or Type Name of Officer

Common

No

President

Title of Officer



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

STÓP PLASERIAD INSPECTIONS

(FORM MUST BE TYPED IN BLA	CK)				
1. Corporate ID No.	2. Name of Corpora	tion	•		
1396	ARTISTIC L	ABEL COMPANY, IN			
3. Street Address Principal Business	Office		City	State	Zip
60 Gilbane Str 4. Business Phone No.	eet	S. State of Incorporation	Warwick	RI	02886 6. SIC Code
737-0666 7. Brief Description of the Character	of Business Conducted i	RHODE ISLAI n Rhode island	ND		0851
Manufacturing 8. NAMES AND ADDRESS			lawful purpose	e.	
President Name Ellen M. Kapla	ın		Vice President Name Ellen M. Ka	aplan	
Street Address 766 Slocum Roa	ıd		Street Address Same		
^{City} Saunderstown	State RI	02874	City	State	Zip
Secretary Name Ellen M. Kapla	in		Treasurer Name Ellen M. Ka	aplan	••
Street Address Same			Street Address Same		•
City	State	Zip	City	State	Zip
9. NAMES AND ADDRES	SES OF THE DIR	ECTORS ("X" BOX FOR AT			
Director Name			Director Name	v 1	
Ellen M. Kapla Street Address	an		Nelson A. I	_ · ·	
766 Slocum Roa	ad		60 Gilbane		
City	State	Zip	City	State	Zip
Saunderstown Director Name	RI	02874	Warwick Director Name	RI	02886
Street Address	•		Street Address		
Clly	State	Zip	City	State	Zip
10. SHARES AUTHORIZE AUTHORIZZD SHARES	D (*X* BOX FOR ATT	TACHMENT)	11. SHARES ISSUED	(*X* BOX FOR ATTACHMENT)	
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1000 SHS PAR COM			700	Common	<i>∖</i> µo

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

	* 1 3 9 6 *	Under penalty of perjury declare and affirm that I have examined
)	this report, including any accompanying schedules and statements, and that all statements contained herein are truly and correct.
Flle Date:	3 le	2-3-5g
Check No.:	2011	311/1 33 N 3 Sarboquire of Officer M. KAPlan
Ву:	KID	Print or Type Name of Officer
FOR SECRETAR	Y OF STATE USE ONLY	Title of Officer

James R. Langevin, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-277-3040

PROFIT CORPORATION ANNUAL REPORT 1997

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 1396

2. Name of Corporation ARTISTIC LABEL COMPANY, INC.

3. Street Address Principal Business Office 60 Gilbane Street City Warwick

RI

02886

4. Business Phone No. 401 737-0666

5. State of incorporation RHODE ISLAND 6. SIC Code 0851

7. Brief Description of the Character of Business Conducted in Rhode Island
Manufacturing of labels and any other lawful purpose

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

Ellen M. Kaplan

Street Address 766 Slocum Road

Saunderstown

RI

02874

Vice President Name

Ellen M. Kaplan

Street Address Same

State

State

Zip

Zip

Secretary Name

Ellen M. Kaplan

Street Address Same

CIN

State

Zip

Treasurer Name

City

City

Ellen M. Kaplan

Street Address Same

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

Director Name

Ellen M. Kaplan

Street Address

Street Address

City

766 Slocum Road

City

Saunderstown

Director Name

RΙ

02874

Director Name

Nelson A. Kaplan

Street Address

60 Gilbane Street

Cirv

Warwick

RI

02886

Director Name

Street Address

State

Zip

Zio

City

State

Zip

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

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

ESSUTED SHARES

Number of Shares

Class/Series

Par Value

1000 SHS PAR COM

700

Common

No

Date

This report must be signed 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 declage 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 Off

Ellen M. Kaplan Print or Type Name of Officer

President

Title of Officer



PROFIT CORPORATION ANNUAL REPORT

1996



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

Filing Period: January 1-March 1

Filing Fee: \$50.00

CORPORATE IO NO.	2 HAME OF CORPORATION	PLEASE TYPE OR	PRINT IN BLACK INK.			
1396	j.	TIC LABEL COMPA	NY. INC.			
STREET AUDRESS PHYNOPAL BUSINESS OFFIC			ัลที	STATE	UP €000€	
60 Gilbane Stre	et		Warwick	RI	02886	
usuvess priove 110. 401 737-0666		S STATE OF INCORPORATION RHODE I	SLAND		6 SIC CODE 0851	
NEF DESCRIPTION OF THE CHARACTER OF BU	ISINESS CONDUCTED IN RHOO	EISLAHO		·-···		
Manufacturing o		d any other law				
SIDENT NAME	8. N A	MES AND ADDE	LESSES OF THE OF	FICERS	-	
Ellen M. Kaplar) 		Ellen M. Kapl	an		
766 Slocum Road	1		Same			
Saunderstown	RI RI	27° 000£ 02874	άτγ	STATE	ZIP COOE	
Ellen M. Kaplan	· .		Ellen M. Kaplan	·····		
ET ADDRESS S ame			STREET ADDRESS S ame	1		
	STATE	ZIP 000£	άπ	STATE	ZIP CODE	
	9 . N A	MES AND ADDE	ESSES OF THE DI	RECTORS		
Filon M. Kanlan			DIRECTOR NAME			
Ellen M. Kaplan			STREET ADDRESS			
766 Slocum Road	TSTATE	T ZIP COON€	aly	STATE	ZIP C00€	
Saunderstown	RI	02874		SIMIE	ar cone	
TOR HAME		· · · · · ·	D'RECTOR HAME			
ET ADDRESS			STREET ADDRESS			
· - · · · · · · · · · · · · · · · · · ·	SIATE	IP CODE	aty	STATE	1 70 COOK	
					ZIP COO€	
- · · · · · · · · · · · · · · · · · · ·	1 0 . S	HARES AUTHOR	IZED AND ISSUED			
NUMBER OF SHARES	CLASS / SERIES	PAR VALUE	NUMBER OF SHARES	ISSUED SHARES CLASS / SERES	PAR VALUE	
1000 SHS PAR		174, 174	700	Common	No	
					1	

This report must be **SIGNED IN INK** by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

Under penalty of perjury. 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

__Ellen_M._Kaplan Print or Type Name of Officer

President

Title of Officer

Nata Nata

File Date:

Check No:

Ву:

For Secretary of State Use Only

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 REPORT

Please Type or Print File Annually – Jan. 1 - March 1 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:	001396		Annual Report for	the year:	
Name of Composition	ARTISTIC LÀ			,	
Business entity organized For foreign entity, address	under the laws of the State of:and telephone number of principal	l office:		is (check one): Corporation (See RIGL Chapter 7-1 al Service Corporation (See RIGL C	
Phone: () Address and telephone of Island (Provide street addr60_0	ilbane_Street rick,_RI02886	ity in Rhode	_any_lawf	of the character of business conducted ul. purpose.	
Phone: (401) 737-	-0666	The same of the same state of			
	Тн		HE OFFICERS AT		
PRESIDENT FILEN M. KAPLA	an 76	street adi S6 Slocum Roa	· ·	Saunderstown, RI	2IP CODE 02874
VICE PRESIDENT		STREET ADD		CITY/STATE	ZIP CODE
ELLEN M. KAPLA	<u></u>	Same street add	DRESS	CITY/STATE	ZIP CODE
ELLEN M. KAPL	<u> </u>	Same STREET ADD	DRESS	CITY/STATE	ZIP CODE
ELLEN M. KAPL		Same			
NAME	THI	E NAMES OF TH STREET ADD	E DIRECTORS A	CITY/STATE	ZIF CODE
ELLEN M. KAPLA	<u>M</u>	Same)4EPC	(135/2° - 23°	
WANE		STREET ADI	DRESS	CHYSTATE	ZIP CODE
NAME.		STREET ADI	DRESS	CHYOSTATE	ZIP CODE
NUMBER OF SHARES AU	THORIZED (Rider may be attached)		NUMBER OF SHAR	ES ISSUED AND OUTSTANDING (R	ider may be attached)
Number of Shares	Class / Series		Number of Shares	Class / Series	
1,000	Coomon		700	Common	
Date	1/95 .19 95	By:	Men	n/e/	
Form 31 1/95	···	PRIST OF TO DI TITLE OF OF	Hen M. Kaplar resident resident		
DI DA CO MAYED, TON	DESIGNATED RE				
FUENSE NOTE: II me re	gistered office and/or registered a	igent indicated below	is incorrect, Form 9 i	must be filed.	

DEBURAH M. TATE, ESQ.
SKOLNIK, MCINTYRE & TATE
321 SOUTH MAIN STREET, SUITE 400
PROVIDENCE RI 02903

FILED MAR-1 1995 RAN 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 LLC Sept 1 - Nov 3 CORP, Jan. 1 - March 1

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

Corporate ID: 0001396		Annual Report for the year: 1994
Name of Business Entity:	ARTISTIC LABIL COMPANY	LWC.
Business entity organized under the Federal Taxpayer Identification Num For foreign entity, address and telepl		and Business Entity is (check one). [X] Business Corporation (See RIGL Chapter 7.7.1) [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
Phone: (- !
Address and telephone of the princip Island (Provide street address - Not I	ocl office of business entity in Rhode P.O. Box)	Brief statement of the character of business conducted in Rhode Island:
60 <u>Gilbane</u> Stre	et	any lawful purpose
Warwick, RI 02	866	
		Date of Organization January 1, 1974
Phone (401) 737-0666		Date of Qualification to do business in Rhode Island (if foreign entity)
	THE NAMES	OF THE OPPICEDS ADD.
В сывых Сипусописых ок № вк	S.DEST (Check One. 579	OF THE OFFICERS ARE: OFFIGURESS CHASTAY ZIE CODE
ELLEN M. KAPLAN		cum Rd., Saunderstown, RI 02874
ELLEN M. KAPLAN C distribution regulation of secre	Same	C ET ADDRESS (TYPE IA C) ZD CODE
**		
FILEN M. KAPLAN GHEFTINASCIAL CAPICER OF TREE FLLEN M. KAPLAN	ASURERICAE COME STR Same	RELEADINESS CITATION AND CODE
NAME:		OF THE DIRECTORS ARE: GET ADDRESS CLYSTATE 7.PCODE 7.PCODE
ELLEN M. KAPLAN		ocum Rd., Saunderstown, RI 02874
	• •	WITANA.
NIM		RECT ADDRUSS CITYATATE ZIP CODE.
NUMBER OF SHARES AUTHOR	RIZED (If Applicable)	NUMBER OF SHARES ISSUED AND OUTSTANDING (If Applicable)
NUMBER 1,000	· · · · · · · · · · · · · · · · · · ·	NUMBER 700
CLASS Common	ı	CLASS Common
SERIES		SERIES
PAR VALUE OR WITHOUT PAR no par	·	PAR VALUE OR no par WITHOUT PAR
Date 3 30 44	. 19 <u>. 94</u> . By	- W. M. J
F	ILED ***	Ellon M. Kaplan V (
APF	R 0 7 1994	President
Form 31 1/94 B	120102	12 OF OPPLER MANING
DESIG	GNATED REGISTERED OR R	ESIDENT AGENT FOR SERVICE OF PROCESS:

Filing Fee \$50.00

7350276

To be filed annually betwee January 1st and March 1s

*:*33

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

Corporate ID	• • •	Annual Repo	ort for the year
First: The name of	the corporation is	1871 6710 6.2	EEL COMETWEEL FULL
SECOND: It is incorp	porated under the laws of	Rhode Island	
THIRD: Character of	business, briefly stated, is	any lawful purpos	e
FOURTH: If foreign of	corporation, address of its	principal office	······································
Fifth: Business add	ress in Rhode Island	60 Gilbane Street Warwick, RI 02886	
Name	ddresses of its directors ar		(Attach rider if necessar) (including number, street, zip code)
Ellen M. Kapl,		•••••••••••••••••••••••••••••••••••••••	
	Director		
Ellen M. Buy	Director President Vice President	266 St Karang Sau Jent	ocum Road. inderstown RJ. 02874
។	Secretary		
	Treasurer	······································	
SEVENTH: Number o	f Shares authorized:		Par Value or statement that
No of Shares	Class	Series	shares are without pur value
1,000	Common	2	No par
EIGHTH: Number of	Shares issued: SEC'	PR 1 2 1993 YOF STATES	Par Value or statement that shares are without
700	Common	, c,	par value No par
Dated 4-1-93	19	Art Stapla By When m	bel Con Juc.

Report must be signed by an efficer i

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

0001396	Annual Report for the	year 1992
the corporation is	ARTISTIC LABEL	COMPANY, INC
orated under the laws of		
business, briefly stated, is	······································	
orporation, address of its p	rincipal office	
ess in Rhode Island6	o Gilbane Stree	et Warwick P.
ddresses of its directors and	i officers: Address (including num	(Attach rider if necessary)
KAJAN Director	20 Wilderness)	rive, Naivagans
Director		02687
Director		
President		
	ent	
·		
	······································	D. A. D
f Shares authorized:		Par Value or statement that shares are without
Class	Series	par value
Common	PAID	no par
Characterists	FFR 2 A tono	Par Value
Snares issued:	_	or statement that shares are without
Class	OLO Sendr STATE	par value
	_	no par
1992	Artistic LubelCo. (Name of Corporation)	hu.
	By Hirence H. Ko	ylan
	Title pres	
	corporation is considered under the laws of c	the corporation is ABTISTIC LABEL Director Stress Director Director President Vice President Secretary Treasurer Treasurer Tommon 1992 Authorized: Chass Common PAID FEB 2 0 1992 SEC'YOF STATE Common 1992 Authorized: Chass Common PAID FEB 2 1992 SEC'YOF STATE Common By Autence of Corporation) By Autence of Marchael Ca. Common By Autence of Marchael Ca.

65

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

Corporate ID	0001396	******	Annual Report for	the year	1991	•••••
First: The nam	ne of the corporation is	•••••••••••••••••••••••••••••••••••••••	ARTISTIC LABE	L COMPANY,	INC.	
SECOND: It is in	acorporated under the la	ws ofR	hode Island	1		
Тнікр: Charact	er of business, briefly sta	ated, is	any lawful purpos	e	•••••••••••	
FOURTH: If fore	eign corporation, address	s of its prin	icipal office			•••••
			South Main Street			
		Prov	idence. RI 02903	•••••••••••••••••••••••••••••••	••••••••••	•••••
SIXTH: Names a	and addresses of its direct	ctors and o		(Attac ng number, street, zip ox	th rider if neces	ssary)
Florence W. Ka	ıplanDir	ector	20 Wilderness Dr	Narraga	nsett. R	<u>I</u> 028
	Dir	ector			•••••••••	•••••
	Dir	ector		•••••••••••••••••••••••••••••••••••••••	••••••••	••••
Florence H. Ka	plan Pre	sident	20 Wilderness Dr	Narraga	nsett, R	<u>I</u> .028
Florence H. Ka	plan Vic	e President	20 Wilderness Dr	., Narraga	nsett, R	<u>I</u> 028
Florence H. Ka	iplan Sec	retary	20 Wilderness Dr	., Narraga	nsett, R	1 028
Florence H. Ka	plan Tre	asurer	.20 Wilderness Dr	Narraga	nsett,R	880…I
SEVENTH: Numi	ber of Shares authorized	l :			Value ement that	
No of Shares	Class		Series	shares a	re without	
1,000	Common		PAID	No	Par	
			FEB 22 1991			
Eighth: Numbe	er of Shares issued:		SEC'Y OF STAT	Par or state	Value	4
No. of Shares	Class		Series		ire without r value	
700	Common			No	Par	
Dated Fel 20	19 ⁹ .1		TISTIC LABEL COMP	ANY, INC.	······	•••••
		Ву	Maine H)	Caplan		
(Report must	be signed by an officer)	Tit	le Secretary	******************************	******************	

Form 31 1/85

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)1396	Annual Report for th	e year 1990
First: The name	of the corporation is	ARTISTIC LABEL COM	PANY, INC.
SECOND: It is inc	corporated under the laws of	Rhode Island	
THIRD: Characte	r of business, briefly stated, is	any lawful purpose	•
FOURTH: If foreig	gn corporation, address of its p	rincipal office	
FIFTH: Business a	address in Rhode Island369	South Main Street,	Providence, RI 0290
SIXTH: Names ar	nd addresses of its directors and		(Attach rider if necessary)
Florence W. Ka	plan Director	20 Wilderness Dr.	, Naragansett, RI 028
	Director		
	Director		
Florence H.	R1472 1111 President	20 Wilderness	Dr. Naugusell Ro
	Vice Presid		<i>U U 3 3</i>
	Secretary		
<u> </u>	Treasurer		
SEVENTH: Numb	per of Shares authorized:	Senes	Par Value or statement that shares are without par value
1000	Common		no par
-000		P.A.D	
Eighth: Numbe	er of Shares issued:	MAR 9 590	Par Value or statement that shares are without
No. of Shares	Class	Series	par value
700	Common		no par
Dated Fet 26	1990	Atistic Lubel (Name of Corporation)	Co. Suc.
		By Marcue H K	uplan
(Report must	be signed by an officer)	Title Secretary	

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

State of Rhode Island and Providence Plantations

,我们就是一个人,我们就是一个人,我们就是一个人,我们就是一个人,我们就是一个人,我们就是一个人,我们就是一个人,我们就是一个人,我们就是一个人,我们就是一个人

FEB - 3 1989

CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

Corporate ID	001396	Annual Report for	the year 1989
FIRST: The nam	e of the corporation is	ADTIBITA LABOR AR	-
SECOND: It is in	corporated under the laws of	Rhode Island	
THIRD: Characte	er of business, briefly stated, is	manufacture and sa	le of labels and
other assoc	ciated products and ar	ny other lawful pur	poses.
FOURTH: If fore	ign corporation, address of its pr	rincipal office	
FIFTH: Business	address in Rhode Island 369		, Providence
Rhode Islan	nd02903	·····	
SIXTH: Names a	nd addresses of its directors and Office		(Attach rider if necessary g number, street, zip code)
	Director		
Florence H.	Kaplan Director	20WildernessD	r,Narragansett,RI
	Director		•••••
Florence H.	Kaplan President	20WildernessD	r,Narragansett,RI
Florence H.	Kaplan Vice Preside	nt 20 Wilderness D	r., Narragansett, RI
Florence H.	Kaplan Secretary	20WildernessD:	rNarragansett,RI
Florence H.	Kaplan Treasurer	20 Wilderness Dr	r., Narragansett, RI
SEVENTH: Numb	er of Shares authorized:		Par Value
No. of Shares	Class	PAID	or statement that shares are without par value
1,000	Common	MAR 06 1989	No Par Value
		SEC'Y OF STATE	
Eighth: Numbe	r of Shares issued:		Par Value or statement that
No. of Shares	Class	Senes	shares are without par value
700	Common		No Par Value
DatedFebruary		Name of Corporation)	MANY, INC.
		Propident	V

(Report must be signed by an officer)

Form 31 1/85

State of Rhode Island and Providence Plantations CORPORATIONS DIVISION 270 WESTMINSTER MALL PROVIDENCE, RHODE ISLAND 02903

Corporate ID13	<u> </u>	· Annual Report for	the year
FIRST: The name	of the corporation is	ARTISTIC LAREL !	DMPANY, LAC.
			ede Island
THIRD: Character	of business, briefly stated, is	manufacture.and.sa	le_of_labels_and
associated_pro	oducts and any other	er_lawful_purposes	
FOURTH: If foreig	n corporation, address of its		······································
FIFTH: Business ac	ddress in Rhode Island		
SIXTH: Names and	d addresses of its directors ar	·	(Attach rider if necessary)
IrvingM. Kapl	Lan Director	20 Wilderness Dri	ve, Narragansett, RI 0
Florence Kapla	an, Director	20 Wilderness Drive	, Narragansett, RI 028
	Director	••••••	
IrvingMKapl	LanPresident	20 Wilderness Drive	Narragansett, RI 028
NelsonAndrew.	.Kaplan Vice President	dent same as above	
	aplan Secretary		
IrvingMKapl	LanTreasurer	same as above	
	r of Shares authorized:		Par Value or statement that shares are without
1,000	Common	Series	parvalue No Par Value
	•	PAI	Ø
Eighth: Number	of Shares issued:	PAI MAR 22 Series SEC'Y. OF	1988 Par Value
No. of Shares	Class	Series Series	or statement that STATE par value
700	Common	SECY. O	No Par Value
Dated 3/3	19.88		ANY, INC.
-		By Lain Mi X Chlo-	· · · · · · · · · · · · · · · · · · ·
(Report must be	signed by an officer)	Title President	

State of Rhode Island and Providence Plantations CORPORATIONS DIVISION 270 WESTMINSTER MALL PROVIDENCE, RHODE ISLAND 02903

Corporate ID 139	96	Annual Report for the year 1988		
FIRST: The name	of the corporation isA	rtistic Label Com	pany, Inc.	
SECOND: It is inco	orporated under the laws of	Rhode Island		
THIRD: Character	of business, briefly stated, is	manufacture and	sale of labels and	
other associ	ated products and a	ny other lawful p	urposes.	
FOURTH: If foreign	n corporation, address of its pr	rincipal office		
FIFTH: Business ac	Idress in Rhode Island 369	9 South Main Stre	et, Providence,	
SIXTH: Names and	addresses of its directors and		(Attach rider if necessary	
Ellen M. Kaplan	Director	766 Slocum Road	d, Saunderstown, RI	
Florence H. Kap	lan Director	20 Wilderness I	Dr., Narragansett, RI	
	Director			
Florence H. Kap	l an President	20 Wilderness I	Or., Narragansett, RI	
Ellen M. Kaplan	Vice Preside	nt 766 Slocum Road	d, Saunderstown, RI	
Florence H. Kap	lan Secretary	20 Wilderness	Dr., Narragansett, RI	
Ellen M. Kaplan	Treasurer		Or., Narragansett, RI	
SEVENTH: Number No. of Shares	of Shares authorized:	Series	Par Value or statement that shares are without par value	
1,000	common		no par value	
EIGHTH: Number o	f Shares issued:	Scries	Par Value or statement that shares are without	
700	common		par value no par value	
Dated March 31	19	1	-	
(Report must be si	gned by an officer) Ti	tle President		

Form 31 1/85

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

State of Rhode Island and Providence Plantations CORPORATIONS DIVISION 270 WESTMINSTER MAIL PROVIDENCE, RHODE ISLAND 02903

Corporate ID	1396	Annual Report for the year	1987
First: 1	The name of the corporation isARTI	ISTIC LABEL COMPANY, INC.	
Second:	It is incorporated under the laws of	Rhode Island	
THIRD: (Character of business, briefly stated, is	manufacture and sale of	labels and
associate	ed products and any other	lawful purposes.	•••••
Fourth:	If foreign corporation, address of its p	rincipal office	
F1FTн: В	Business address in Rhode Island		
369	South Main Street, Provid	ence, RI 02903	
Sixth: N	Varnes and addresses of its directors and	l officers: 20 W/Address (including number, str	(Attach rider if necessary)
Irving M.	. Kaplan Director	33 Cold-Brook-Drive,	Cranston, RI R
Florence	Diacoi	20 Wilderness Dr.	Cranston, RI Naryayancett K
	Director	•	0 02 68
	. Kaplan President	same as above	
Nelson A	Andrew Kaplan Vice Preside	ent same as above	
Florence	H. Kaplan Secretary	same as above	
Irving M.	Kaplan Treasurer	same as above	••••••
Seventh:	Number of Shares authorized:		Par Value or statement that
No of Shares	s Class	Series	shares are without par value
1,000	Common		No Par Value
Еіднтн:	Number of Shares issued:		Par Value or statement that
No. of Shares	Class	A I D Series	shares are without par value
700	Common MAR 1	.0 1987	No Par Value
Dated 3		ARTISTIC LABEL COMPANY,	INC. MAY 06 199
	В	sy late to Robbin	
(Repo	ort must be signed by an officer)	itle President	••••••

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

State of Rhude Island and Providence Plantations CORPORATIONS DIVISION 270 WESTMINSTER MALL PROVIDENCE, RHODE ISLAND 02903

Corporate ID 1396	••••••••••••	•••••	Annual Rep	ort for the	year 1986	·······
FIRST: The name of	of the corporation is.	AR	TISTIC LABEL COMPA	NY. INC.	•••••••••••••••••••••••••••••••••••••••	
SECOND: It is income	porated under the la	ws of	Rhode I	sland		•••••
	-		manufacture ar			
associated pro	ducts and any	othe	er lawful purpos	ses.	•••••••••	*******
FOURTH: If foreign	corporation, address	s of its	principal office			
FIFTH: Business add	dress in Rhode Island	d				
369 South M	ain Street. P	rovi	dence, R.I. 0290)3	·····	
SIXTH: Names and	addresses of its direc	tors an		s (including nun	(Attach rid aber, street, zip code)	er if necessary)
IrwingM. Kapl	anDir	ector	33 Cold Brook	Drive,	Cranston,	R.I.
Florence Kapla	n Dire	ector	33 Cold Brook	Drive,	Cranston,	R.I.
	Dire	ector		•••••••	•••••	•••••
Irving M. Kapl	an Pres	sident	same as above		••••	
Nelson Andrew	Kaplan Vice	e Presid	lemame as above	*****************	********************	
Florence H. Ka	plan Seci	retary	same as above	••••		
Irving M. Kapl	an Trea	surer	same as above	*************		
SEVENTH: Number of No. of Shares	of Shares authorized	•	Series		Par Value or statement shares are wi	that hout
1,000	Common		3.113		par value No Par	
EIGHTH: Number of	Shares issued:	03/14/96	Series		Par Value or statement shares are wit par value	that hout
700	Common	PAIR			No Par	Value
Dated 2/24 APR 09 (Report must be si	ENTO Medicer)	194864	ARTISTIC LABEL (Name of Corporation) By M Title President	· Rol	ln	

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

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION 270 WESTMINSTER MALL PROVIDENCE, RHODE ISLAND 02903

Corporate ID139£		Annual Report for	the year1985
			<u> </u>
			le of labels and
FIFTH: Business ad	ldress in Rhode Island		
369 South Mai	n Street, Providence	e, RI 02903	
SIXTH: Names and	addresses of its directors and	officers:	(Attach rider if necessary)
Irving M. Kaplan	Director	33 Cold Brook Dri	ive, Cranston, RI
	Director	33 Cold Brook Dri	ive, Cranston, RI
•••••	Director	••••••	
Irving M. Kaplan	President	same as above	
Nelson Andrew Kar	olan Vice Presiden		
	Treasurer		
SEVENTH: Number	of Shares authorized:		Par Value
No. of Shares	Class	Series	or statement that shares are without par value
1,000	Common	AM C = c = c	No Par Value
EIGHTH: Number o		RECEIVED MAR	1985
	of Shares issued:		Par Value or statement that
No. of Shares 700	Class	Series	shares are without par value
700	Common		No Par Value
DatedFebruary	12.2	RTISTIC LABEL COMP. ame of Corporation)	
(Range muse be -	is and but as offer.	V	
Form 31 1/85	igned by an officer) Ti	lle President	

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

State of Rhode Island and Providence Plantations Office of the secretary of state

			Annual Report for	the year 1984
First:	The name of t	he corporation	is ARTISTIC LA	BEL COMPANY, INC.
***************************************				• • • • • • • • • • • • • • • • • • • •
SECOND	: It is incorpo	rated under t	he laws of Rhode	Island
THIRD:	Character of h	ousiness, briefl	y stated, is manuf	acture and sale of
lahels and	d associated	products a	ind any other la	wful purposes.
Fourth	: If foreign	corporation, a	ddress of its princip	al office
F і гт н :	Business add	ress in Rhode	Island	
369	South Main	Street, Pro	ovidence, R.I. 0	2903
Sixth:	Names and a	ddresses of its	directors and office	ers:
	(Addresses mu	st include street	and number, if any)	ţ.
	Name	Office		Address
Irving M.	Kaplan	Director	33 Cold Broo	ok Drive, Cranston, R.I.
Florence	Kaplan	Director	33 Cold Brook	Drive, Cranston, R.I.
		Director		
Irving M.	Kaplan	President		same as above
Nelson An	drew Kaplan	Vice Pres	ident	same as above
Florence	H. Kaplan	Secretary		same as above
	Kaplan space is needed,		•	same as above
SEVENT	и: Number o	f Shares auth	orized:	Par Value or statement that
No. of St	bares	Class	Series	shares are without par value
1,000		Common		No Par Value
Еіснтн	: Number of	Shares issued	i :	Par Value or statement that shares are without
No. of Si	hares	Class Common	Series	par value No Par Value
700		2		
		6 00,	NOMICOIC IA	BEL COMPANY, INC.
Dated:	anuary 30,	19 84	(Name of Corpora	
		55 * 55 *	By /w. M.	Kabler
	41	八 · 円 *	Title President	
	ン 、・	o , a		e signed by an officer)
		v •		-

If the corporation has changed its registered office and/or its registered agent, Form #9 must be filed. Please contact Corporation Division for information. 277-3040

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

State of Uhode Island and Providence Plantations OFFICE OF THE SECRETARY OF STATE

Annual Report for the year 1983 FIRST: The name of the corporation is ARTISTIC LABEL COMPANY, INC. SECOND: It is incorporated under the laws of Rhode Island THIRD: Character of business, briefly stated, is manufacture and sale of ... labels and associated products and any other lawful purposes. FOURTH: If foreign corporation, address of its principal office FIFTH: Business address in Rhode Island (blank reports will be mailed to this address) 369 South Main Street, Providence, R.I. 02903 SIXTH: Names and addresses of its directors and officers: (Addresses must include street and number, if any) Office Address 33 Cold Brook Dr., Cranston, R.I. Irving M. Kaplan Director Florence Kaplan Director 33 Cold Brook Dr., Cranston, R.I. Director Irving M. Kaplan President same as above Nelson Andrew Kaplan Vice President same as above Florence H. Kaplan Secretary same as above Irving M. Kaplan Treasurer same as above (If additional space is needed, attach rider) SEVENTH: Number of Shares authorized: or statement that shares are wit par value No. of Shares Class Series 1,000 Common No Par Value Par Value or statement that shares are without par value EIGHTH: Number of Shares issued: No. of Shares Class Series 700 Common 3 No Par Value 83 19 83 ARTISTIC LABEL COMPANY, INC. Dated: February 15, (Name of Corporation) President

If the corporation has changed its registered office and/or its registered agent.
Form #9 must be filed. Please contact Corporation Division for information. 277-3040

(Report must be signed by an officer)

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

State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

	•	Annual Repor	rt for the ye	ear 1982	
First: The name of	the corporation	is ARTIS	TIC LABE	L COMPANY,INC.	
SECOND: It is incorp	orated under th	e laws of R	hode Isl	and	
THIRD: Character of	business, briefly	stated, is m	anufactu:	re and sale of	
labels and assoc	iated produc	ts and any	other I	awful purposes.	
FOURTH: If foreign	corporation, ad	ldress of its p	rincipal of	fice	
FIFTH: Business add	ress in Rhode I	sland (blank	reports wi	ll be mailed to this	
address) 220 South Ma	in Street, F	rovidence,	R.I. 02	903	
Sixth: Names and a	addresses of its	directors and	officers:		
(Addresses n	nust include street a	nd number, if any)			
Name	Office		 Add	ress	
Irving M. Kaplan	Director	33 Cold	Brook Dr	rive, Cranston, R.	.]
Florence Kaplan	Director	33 Cold	Brook Di	rive, Cranston, R.	. 1
	Director			*****	
Irving M. Kaplan	President		same as.	above	
Nelson Andrew Kaplan	Vice Preside	ent	same as	above	
Florence H. Kaplan	Secretary			above	
Irving M. Kaplan			same as.	above	
SEVENTH: Number of	f Shares author	rized:		Par Value	
No. of Shares	Class	Series		or statement that shares are without par value	
1,000	Common			No Par Value	
		FE	B 18 19	82	
EIGHTH: Number of	Shares issued:		Ju	Par Value or statement that	
No. of Shares	Class	Series		shares are without par value	
700	Common		2	No Par Value	
			₩ 82 .		
Dated: February 8,	1982	ARTISTIC	LABEL C	COMPANY, INC.	
		By / Cont /	n KH	in	
	•	Title Pres	sident -	<u>a</u>	
		(Report r	nust be stgne	d by an officer)	
			•		
If the corporation has	changed its regis	tered office and	d/or its √eg	stered agent,	

Form #9 must be filed. Please contact Corporation Division for information. 277-3040

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

State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT

OF

ARTISTIC LABEL COMPANY, INC.

Pursuant to the provisions of Section 7.1.1-118 of the General Laws, 1956, as amended, the undersigned corporation hereby submits the following annual report:

FIRST: The name of the corporation is Artistic Label Company, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: The address of its registered office in Rhode Island is 220 South Main Street, Providence, R.I. 02903 and the name of its registered agent in Rhode Island at such address is Howard I. Lipsey, Esquire

FOURTH: If a foreign corporation, the address of its principal office in the state

or country under the laws of which it is incorporated is

FIFTH: The character of the business in which it is actually engaged in Rhode Island, briefly stated, is manufacture and sale of labels and associated products and any other lawful purposes.

SIXTH: The names and respective addresses of its directors and officers are:

Name	Office				Address		
Irving M. Kaplan	Director	33	Cold	Brook	Drive,	Cranston,	R.I.
Florence Kaplan	Director	33	Cold	Brook	Drive,	Cranston,	R.I.
	Director						
•	Director						
	Director						
	Director						
Irving M. Kaplan	President		sa	ame as	above		
Nelson Andrew Kaplan	Vice President		S	ame as	above		
Florence H. Kaplan	Secretary		Sä	ame as	above		
Irving M. Kaplan	Treasurer		Si	ame as	above		

SEVENTH: The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares 1,000	<u>Class</u> Common	<u>Se</u> ric <u>s</u>	3 2 81	Par Value per Share or Statement that Shares are without Par Value no par value
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Eighth: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares 700

Class Common ;

Par Value per Share
or Statement that
Shares are without
Par Value

•No par value

Dated February 20 ,1981 ARTISTIC LABEL COMPANY, INC.

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

State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT

 \mathbf{OF}

AI	RTISTIC LABEL C	OMPANY, INC.	
Pursuant to the provi amended, the undersigned FIRST: The name of the	corporation hereby	submits the follow	wing annual report:
SECOND: It is incorpo	orated under the la	ws of Rhode I	Island
THIRD: The address of Street, Providence, I	R T 02903		220 South Main
and the name of its registere			
FOURTH: If a foreign country under the laws of wh	corporation, the ad	dress of its principa	
FIFTH: The character Island, briefly stated, is products and any other	manufacture and	which it is actual sale of labels	and associated
SIXTH: The names and Name	d respective address Office	es of its directors a	nd officers are:
lrving M. Kaplan Florence Kaplan	Director Director	33 Cold Brook same as above	Drive, Cranston, R.1
	Director		
	Director		
	Director		· ····
	Director		
Irving M. Kaplan Nelson Andrew Kaplan Florence H. Kaplan	President Vice President	same as above	
Irving M. Kaplan	Secretary Treasurer	same as above	
SEVENTH: The aggregate by classes, par value of shares			
Number of Shares	Class Common	2 <u>Series</u> № 83	Par Value per Share or Statement that Shares are without Par Value no par value
Form 31 8-79		*0915.00 272301415.0cBi	FEB 29 1980

Eighth: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	<u>C.ass</u>	Series	or Statement that Shares are without Par Value:
700	Common		No par value

Dated February / , 19 80°

ARTISTIC LABEL COMPANY, INC.

Its President

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

State of Rhode Island and Providence Plantations OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT

	OF		
ARTIS	TIC LABEL COM	PANY, INC.	
Pursuant to the provision amended, the undersigned confirmed First: The name of the	rporation hereby	submits the follow	ing annual report:
		· · · · · · · · · · · · · · · · · · ·	
SECOND: It is incorpora	ated under the la	ws of Rhode Isl	and
THIRD: The address of i	ts registered office	in Rhode Island is 2	20 South Main
Street, Providence, RI and the name of its registered Howard I. Lipsey, Esqui	agent in Rhode Isl		is
FOURTH: If a foreign country under the laws of which	orporation, the ad	dress of its principal	office in the state or
FIFTH: The character of Island, briefly stated, is maproducts and any other	of the business in anufacture and lawful purpose	which it is actually I sale of labels es.	engaged in Rhode and associated
SIXTH: The names and r	respective address	es of its directors and	l officers are:
Name Irving M. Kaplan	Office	Cold Brook Drive	Address
Florence Kaplan	Director same	•	, cranston, ki
	Director Director	43 40000	-
•	Director		
	Director		
	Director		
Irving M. Kaplan	President same		•
Nelson Andrew Kaplan	Vice President		
Florence H. Kaplan	Secretary same	as above	
Irving M. Kaplan		as above	
SEVENTH: The aggregate by classes, par value of shares, s	number of shares hares without par	which it has authorit value,andseries,if an	y to issue, itemized y,withinaclass,is:
Number of Shares	Class	3 Series	Par Value per Share or Statement that Shares are without Par Value
1000	common	79	no par value
		97:5A14	MAR 151979

Form 31 30M 11-78

Eighth: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Clase	Series_	or Statement that Shares are without Par Value
700	common		no par value

Dated February 27, 1979

ARTISTIC LABEL COMPANY, INC.

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

State of Rhode Island and Providence Plantations OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT

		OF	
	ARTISTIC LA	BEL COMPANY, INC	•
amended, the undersign	gned corporation h	ereby submits the fo	ne General Laws, 1956, as allowing annual report:
SECOND: It is in	corporated under	the laws of Rhode	Island
THIRD: The add	iress of its register Providence, I	27 02903	and is 220 South
and the name of its reg Howard I. Li	ristered agent in R psey, Esquire		
FOURTH: If a fo	oreign corporation s of which it is inco	, the address of its pi	rincipal office in the state or
Island, briefly stated,	aracter of the bus is manufac any other law	ture and sale o	actually engaged in Rhode f labels and associated
SIXTH: The names	and respective add	dresses of its director	s and officers are:
Irving M. Kaplan Florence Kaplan			Brook Dr., Cranston, RI above
	Directo Directo		
	Directo Directo		
Irving M. Kaplar Nelson Andrew Ka	nlan	ent same as a resident	above
Florence H. Kapl	- BCCTCG	•	
Irving M. Kaplar SEVENTH: Thea	. ITCasu		authority to issue, itemized
by classes, par value of s	shares, shares with	out par value, and ser	ies, if any, within a class, is:
Number of Shares	Class	3 Segjes	Par Value per Share or Statement that Shares are without Par Value
1000	common	≈ 78	no par value

Number of Shares	<u>Class</u>	3 Sagles	Par Value per Share or Statement that Shares are without Par Value
1000	common	22 78	no par value
Corm 31 12M 8-77		*0915.00 6782E1415.00BU	EB 28 1978

Eighth: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares Class Series Par Value per Share or Statement that Shares are without Par Value

700 common no par value

Dated February 27, 19 78

ARTISTIC LABEL COMPANY, INC.

r President

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

State of Rhode Island and Providence Plantations Office of the secretary of state

ANNUAL REPORT

OF

	OF		
A.	RTISTIC LABEL COM	IPANY, INC.	
nended, the undersign	provisions of Section ned corporation hereby e of the corporation is	y submits the follow	•
SECOND: It is inc	orporated under the la	ws of Rhode I	sland
THIRD: The addr	ess of its registered of	fice in Rhode Island	l is
	-		R.I. 02903
_	stered agent in Rhode ward I. Lipsey, E		ess is
	-	-	cipal office in the state or
land, briefly stated, i		nd sale of labe	ually engaged in Rhode els and associated
SIXTH: The names	and respective address	es of its directors a	nd officers are:
"Irving…MKapla		33_Cold_Bro	ook Dr., Cranstop,
Florence Kaplan	Director	same as al	ove
	Director	***************************************	
<u> </u>	Director	***************************************	
	Director		
mr.u.	Director		
Irving M. Kapla		same as	above
	aplan Vice Presid		
Florence H. Kap	lan Secretary	same as	above
Irving M. Kapla	n Treasurer	same as	above
			thority to issue, itemized , if any, within a class, is:
Number of Shares	Class	Series	Par Value per Share or Statement that Shares are without Par Value
1000	Common		No Par Value
	 MAR 1 0 1977	ндя 10-77	

Eighth: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Par Value per Share or Statement that Shares are without Par Value Number of Shares Seties Class 700 No Par Value Common

Dated February 28, 1977

ARTISTIC LABEL COMPANY, INC.
(NAME OF COMPORATION)

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

State of Rhode Island and Providence Plantations Office of the secretary of state

ANNUAL REPORT

 \mathbf{OF}

	ARTISTIC LAI	BEL COMPANY, IN	IC.
amended, the undersign	ned corporation herel	by submits the follo	General Laws, 1956, as wing annual report:
SECOND: It is inc	corporated under the	laws of Rhode	: Island
THIRD: The addr	ess of its registered (office in Rhode Islan	ıd is
	uth Main Street,		
and the name of its regi			
			cipal office in the state or
products and		ul purpose.	
Irving M. Kaplar		33 Cold B	Address rook Dr Cranston, R.I
Plorence Kaplan			rook Dr. Cranston, R.I
	Director		· · · · · · · · · · · · · · · · · · ·
	Director		
· ····································	Director		•
	Director		
Irving M. Kaplar	President	sa	me as above
Nelson Andrew Ka	aplan Vice Presiden	nt	
Florence H. Kapl	lan Secretary	sa	me as above
Irving M. Kaplar	Treasurer	e e e e e e e e e e e e e e e e e e e	
SEVENTH: The agg by classes, par value of sh	regate number of sha ares, shares without p	ares which it has au ar value, and series	thority to issue, itemized , if any, within a class, is:
Number of Shares	Class	Series	Par Value per Share or Statement that Shares are without Par Value
1000	Common	<u> </u>	No Par Value
_ • • •			HO Lai vaide

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EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	<u>Class</u>	Series	Par Value per Share or Statement that Shares are without Par Value
700	Common		No Par Value

Dated January , 19.76

ARTISTIC LABEL COMPANY, INC.
(NAME OF CORPORATION)

By Kruz M. Katan

Its President

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

State of Rhode Island and Providence Plantations OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT

OF

ARTI	STIC LABEL	COMPANY, INC.
Pursuant to the provis amended, the undersigned co	sions of Sectio orporation here	n 7-1.1-118 of the General Laws, 1956, a by submits the following annual report: is Artistic Label Company, Inc.
SECOND: It is incorpo	rated under the	lawsof Rhode Island
		office in Rhode Island is
220 South Main S	treet. Provi	dence, Rhode Island 02903
and the name of its registered	d agent in Rhod	e Island at such address is
FOURTH: If a foreign	corporation, th	e address of its principal office in the state or
country under the laws of wi	nich it is incorp	orated is .
A Company of the Comp		en e man en
FIFTH: The character Island, briefly stated, is	of the busines	es in which it is actually engaged in Rhode
the second second second second		and the second s
SIXTH: The names and	respective addi	resses of its directors and officers are:
Irving M. Kaplan	Director	Cold Brook Address 33 Pilgrim Dr., Cranston, R.I.
Florence Kaplan	Director	Cold Brack 33 Pilgrim Dr., Cranston, R.I.
the second of th	Director	ere commence and the commence of the commence
	Director	markan a sanah markan mark
the second of th	Director	ere
	Director	
Irving M. Kaplan	President	same as above
Nelson Andrew Kaplan	Vice Preside	
Florence H. Kaplan	Secretary	same as above
Irving M. Kaplan	Treasurer	
SEVENTH: The aggregation	te number of sh	ares which it has authority to issue itemized

SEVENTH: The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	Series	Par Value per Share or Statement that Shares are without Par Value
1000	Common		No Par Value

MAR 11 1975

EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	<u>Series</u>	or Statement that Shares are without Par Value
<u> </u>	Common		No Par Value

Dated February ..., 19 75

ARTISTIC LABEL COMPANY, INC.

By XM M. Radion

1ts President

120-75 356 2 979 A1+0+ +15.00