



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

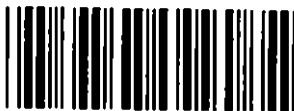
PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

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

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 7095		2. Name of Corporation MARION MFG. CO.			
3. Street Address Principal Business Office 87 Corliss Street			City Providence	State R.I.	Zip 02904
4. Business Phone No. (401) 331-4343		5. State of Incorporation RHODE ISLAND			6. SIC Code 679
7. Brief Description of the Character of Business Conducted in Rhode Island MANUFACTURER OF CUSTOM WINDOW TREATMENTS.					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Jorge Medeiros			Vice President Name MARIA T. Medeiros		
Street Address 66 Farnum Street			Street Address 66 Farnum Street		
City Ea. Providence	State RI	Zip 02914	City Ea. Providence	State RI	Zip 02914
Secretary Name					
Street Address S			Street Address		
City	State	Zip	City	State	Zip
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) ☐			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
500 COMM NO PAR VALUE			100	NO PAR COM	

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



File Date	1-25-05
Check No.	6250
By:	<u>2</u>
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

JORGE A. MEDEIROS

Print or Type Name of Officer

PRES.

Title of Officer



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Matthew A. Brown, Secretary of State

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

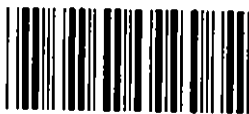
PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

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

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 7095		2. Name of Corporation MARION MFG CO		
3. Street Address Principal Business Office 87 Corliss Street		City Providence	State RI	Zip 02904
4. Business Phone No. (401) 331-4343		5. State of Incorporation RHODE ISLAND		6. SIC Code 679
7. Brief Description of the Character of Business Conducted in Rhode Island MANUFACTURER OF CUSTOM WINDOW TREATMENTS.				
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS				
President Name Jorge Medeiros		Vice President Name Maria T. Medeiros		
Street Address 66 Farnum Street		Street Address 66 Farnum Street		
City Providence	State RI	Zip 02914	City Providence	State RI
Secretary Name		Treasurer Name		
Street Address		Street Address		
City	State	Zip	City	State
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS				
Director Name		Director Name		
Street Address		Street Address		
City	State	Zip	City	State
Director Name		Director Name		
Street Address		Street Address		
City	State	Zip	City	State
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) ☐		11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐		
AUTHORIZED SHARES		ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series
500 COMM NO PAR VALUE			100	NO PAR COM

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



* 7 0 9 5 *

File Date	1-27-04
Check No.	5441
By:	2
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 **Jorge A Medeiros** Date **1/23/2004**
Print or Type Name of Officer **JORGE A MEDEIROS**
Title of Officer **PRES.**



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

Edward S. Inman, III, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003

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

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No.

7095

2. Name of Corporation

MARION MFG. CO.

3. Street Address Principal Business Office

City

State

Zip

4. Business Phone No. 87 Corliss Street

5. State of Incorporation

Providence

RI

02904

6. SIC Code

(401) 331-4343

RHODE ISLAND

679

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

Custom Window Treatments and Bedding

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

FILL IN SPACES BEFORE USING ATTACHMENTS

President Name

Jorge Medeiros

Street Address

66 Farnum Street

City

State

Zip

Ea. Providence

RI

.02914

Secretary Name

Street Address

City

State

Zip

Vice President Name

Maria T. Medeiros

Street Address

66 Farnum Street

City

State

Zip

Ea. Providence

RI

.02914

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

Street Address

City

State

Zip

Director Name

Street Address

City

State

Zip

Director Name

Street Address

City

State

Zip

Director Name

Street Address

City

State

Zip

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

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

500 COMM NO PAR VALUE

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

ISSUED SHARES

Number of Shares

Class/Series

Par Value

100

NO PAR COM

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



* 7 0 9 5 *

File Date: 1.21.03

Check No.: 5002

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

Date

JORGE A. MEDEIROS

Print or Type Name of Officer

Title of Officer

5

Form G30 12/02



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

Edward S. Inman, III, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **7095** 2. Name of Corporation **MARION MFG. CO.**
3. Street Address Principal Business Office **87 Corliss Street** City **Providence** State **RI** Zip **02904**
4. Business Phone No. **(401) 331-4343** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **679**
7. Brief Description of the Character of Business Conducted in Rhode Island

8. NAMES AND ADDRESSES OF THE OFFICERS (ATTACHMENT) - CUSTOM WINDOW TREATMENTS AND BEDDING
FILL IN SPACES BEFORE USING ATTACHMENTS

President Name			Vice President Name		
Jorge Medeiros			Maria T. Medeiros		
Street Address			Street Address		
66 Farnum Street			66 Farnum Street		
City	State	Zip	City	State	Zip
Ea. Providence	RI	02914	Ea. Providence	RI	02914
Secretary Name			Treasurer Name		
Street Address			Street Address		
City			City		
State			State		
Zip			Zip		

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

Director Name			Director Name		
Street Address			Street Address		
City			City		
State			State		
Zip			Zip		
Director Name			Director Name		
Street Address			Street Address		
City			City		
State			State		
Zip			Zip		

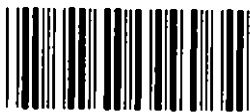
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES
Number of Shares Class/Series Par Value
500 COMM NO PAR VALUE

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

ISSUED SHARES
Number of Shares Class/Series Par Value
100 NO PAR COM

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



* 7 0 9 5 *

File Date: **1-11-02**
Check No.: **46666**
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: **1/10/02**
Print or Type Name of Officer: **JORGE A. MEDEIROS**

Title of Officer: **[Signature]**
Page 5



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

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

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 7095 2. Name of Corporation MARION MFG. CO.

3. Street Address Principal Business Office

City

State

Zip

87 Corliss Street, Providence,

4. Business Phone No.

5. State of Incorporation
RHODE ISLAND

RI

02904
6. SIC 379

(401) 331-4343

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

Manufacturer of custom window treatments, etc.

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

President Name

Vice President Name

Jorge Medeiros

Maria T. Medeiros

Street Address

Street Address

66 Farnum Street

66 Farnum Street

City State Zip

City State Zip

Ea, Providence RI

02914

Ea. Providence RI

02914

Secretary Name

Treasurer Name

Street Address

Street Address

City State Zip

City State Zip

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

Director Name

Director Name

Street Address

Street Address

City State Zip

City State Zip

Director Name

Director Name

Street Address

Street Address

City State Zip

City State Zip

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

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

500 COMM NO PAR VALUE

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

ISSUED SHARES

Number of Shares

Class/Series

Par Value

100

NO PAR COM

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



* 7 0 9 5 *

File Date: 1/12

Check No.: 4088

By: ca

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 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)

1. Corporate ID No. **7095** 2. Name of Corporation **MARION MFG. CO.**
3. Street Address Principal Business Office
387 Charles Street City **Providence** State **RI** Zip **02904**
4. Business Phone No. **(401) 331-4343** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **679**
7. Brief Description of the Character of Business Conducted in Rhode Island

Manufacturer of Custom Window Treatments

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

FILL IN SPACES BEFORE USING ATTACHMENTS

President Name

Vice President Name

Jorge Medeiros
Street Address

Maria T. Medeiros
Street Address

66 Farnum Street
City

66 Farnum Street
City

Ea. Providence State **RI** Zip **02914**

Ea. Providence State **RI** Zip **02914**

Maria T. Medeiros
Street Address

Jorge Medeiros
Street Address

66 Farnum Street
City

66 Farnum Street
City

Ea. Providence State **RI** Zip **02914**

EA. Providence State **RI** Zip **02914**

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

FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

Director Name

Street Address

Street Address

City State Zip

City State Zip

Director Name

Director Name

Street Address

Street Address

City State Zip

City State Zip

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

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

AUTHORIZED SHARES

ISSUED SHARES

Number of Shares Class/Series Par Value

Number of Shares Class/Series Par Value

500 SHS NO PAR COM

100 NO PAR COM

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



* 7 0 9 5 *

File Date: **1/25/00**

Check No.: **3502**

By: **GAB**

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

JORGE A MEDEIROS

Print or Type Name of Officer

PRES.

Title of Officer



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

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



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

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 7095	2. Name of Corporation MARION MFG. CO.
3. Street Address Principal Business Office 387 Charles Street	City Providence State RI Zip 02904
4. Business Phone No. (401) 331-4343	5. State of Incorporation 118 6. SIC Code 879
7. Brief Description of the Character of Business Conducted in Rhode Island	

Manufacturer of Custom Draperies and Window Treatments, Accessories

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

President Name Jorge Medeiros	Vice President Name Maria T. Medeiros
Street Address 66 Farnum Street	Street Address 66 Farnum Street
City Ea. Providence RI Zip 02914	City Ea. Providence RI Zip 02914
Secretary Name Maria T. Medeiros	Treasurer Name Jorge Medeiros
Street Address 66 Farnum Street	Street Address 66 Farnum Street
City Ea. Providence RI Zip 02914	City Ea. Providence RI Zip 02914

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

Director Name	Director Name
Street Address	Street Address
City	City
State	State
Zip	Zip
Director Name	Director Name
Street Address	Street Address
City	City
State	State
Zip	Zip

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

AUTHORIZED SHARES	Class/Series	Par Value
500 SHS NO PAR COM		

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

ISSUED SHARES	Class/Series	Par Value
100	NO PAR COM	

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



* 7 0 9 5 *

File Date: **Feb 4, 99**
Check No: **2929**
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: **JAN. 20/99**
Print or Type Name of Officer: **JORGE A MEDEIROS**
Title of Officer: **PRES.**



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

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



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR **1998**
Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.

2. Name of Corporation

3. Street Address Principal Business Office **MARION MFG. CO.**

City

State

Zip

4. Business Phone No. **387 Charles Street**

5. State of Incorporation

Providence

RI

02904

6. SIC Code

7. Brief Description of the Character of Business Conducted in Rhode Island **(401) 331-4343 RHODE ISLAND**

0679

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

President Name

Vice President Name

Street Address **Jorge Medeiros**

Street Address **Maria T. Medeiros**

City **66 Farnum Street**

State

City **66 Farnum Street**

State

Zip

Ea. Prov. RI

02914

Ea. Prov. R.I.

02914

Secretary Name

Treasurer Name

Street Address **Maria T. Medeiros**

Street Address **Jorge Medeiros**

City **66 Farnum Street**

State

City **66 Farnum Street**

State

Zip

Ea. Prov. R.I.

02914

Ea. Prov. R.I.

02914

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

Director Name

Director Name

Street Address

Street Address

City

State

Zip

City

State

Zip

Director Name

Director Name

Street Address

Street Address

City

State

Zip

City

State

Zip

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

AUTHORIZED SHARES

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

ISSUED SHARES

Number of Shares

Class/Series

Par Value

Number of Shares

Class/Series

Par Value

500 SHS NO PAR COM
500 SHS NO PAR COM

100 **NO PAR COM**

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



* 7 0 9 5 *

File Date: **2/13**

Check No.: **2315**

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

Date

JORGE A. MEDEIROS

Print or Type Name of Officer

PRESIDENT

Title of Officer



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

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

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. 7095		2. Name of Corporation MARION MFG. CO.		
3. Street Address Principal Business Office 387 Charles Street		City Providence	State RI	Zip 02904
4. Business Phone No. (401) 331-4343		5. State of Incorporation RHODE ISLAND		6. SIC Code 0679
7. Brief Description of the Character of Business Conducted in Rhode Island Manufacturing of custom window treatments				
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) ☒				
President Name Jorge Medeiros		Vice President Name Maria T. Medeiros		
Street Address 66 Farnum Street		Street Address 66 Farnum Street		
City Ea. Prov.	State RI	Zip 02914	City Ea. Prov.	State RI
Secretary Name Maria T. Medeiros		Treasurer Name Jorge Medeiros		
Street Address 66 Farnum Street		Street Address 66 Farnum Street		
City Ea. Prov.	State RI	Zip 02914	City Ea. Prov.	State RI
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) ☒				
Director Name		Director Name		
Street Address		Street Address		
City	State	Zip	City	State
Director Name		Director Name		
Street Address		Street Address		
City	State	Zip	City	State
10. SHARES AUTHORIZED AND ISSUED (*X* BOX FOR ATTACHMENT) ☒				
AUTHORIZED SHARES			ISSUED SHARES	
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series
500 SHS NO PAR COM			100	NO-PAR-COM

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



* 7 0 9 5 *

File Date: **1/9/97**
Check No.: **1013**
By: **1010**
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: **Jorge A. Medeiros** Date: **1/6/97**
Print or Type Name of Officer: **JORGE A. MEDEIROS**
Title of Officer: **PRESIDENT**

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

PLEASE TYPE OR PRINT IN BLACK INK.

1. CORPORATE ID NO. 7095		2. NAME OF CORPORATION MARION MFG. CO.		
3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE 387 Charles Street		CITY Providence	STATE R.I.	ZIP CODE 02904
4. BUSINESS PHONE NO. 401-331-4343		5. STATE OF INCORPORATION RHODE ISLAND		6. SIC CODE 0679
7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND Fabrication of custom draperies and interiors				
8. NAMES AND ADDRESSES OF THE OFFICERS				
PRESIDENT NAME Jorge Medeiros		VICE PRESIDENT NAME Maria T. Medeiros		
STREET ADDRESS 66 Farnum Street		STREET ADDRESS 66 Farnum Street		
CITY Ea. Prov.	STATE R.I.	ZIP CODE 02914	CITY Ea. Prov.	STATE R.I.
SECRETARY NAME Maria T. Medeiros		TREASURER NAME Jorge Medeiros		
STREET ADDRESS Same as above		STREET ADDRESS Same as above		
CITY Ea. Prov.	STATE R.I.	ZIP CODE 02914	CITY Ea. Prov.	STATE R.I.
9. NAMES AND ADDRESSES OF THE DIRECTORS				
DIRECTOR NAME None		DIRECTOR NAME		
STREET ADDRESS		STREET ADDRESS		
CITY	STATE	ZIP CODE	CITY	STATE
DIRECTOR NAME		DIRECTOR NAME		
STREET ADDRESS		STREET ADDRESS		
CITY	STATE	ZIP CODE	CITY	STATE
10. SHARES AUTHORIZED AND ISSUED				
AUTHORIZED SHARES			ISSUED SHARES	
NUMBER OF SHARES	CLASS / SERIES	PAR VALUE	NUMBER OF SHARES	CLASS / SERIES
500 SHS NO PAR COM			100	No Par

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: 2/3/96

Check No: 1055

By: UP

For Secretary of State Use Only

Signature of Officer

Jorge A. Medeiros

Print or Type Name of Officer

Title of Officer

President

2/3/96
Date



CH# 3125
mnc

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.

0007095

Corporate ID: _____ Annual Report for the year: 1995

Name of Corporation: MARION MFG. CO.

Business entity organized under the laws of the State of: R.I.

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) 331-4343

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

387 Charles Street

Providence, R.I. 02904

Phone: (401) 331-4343

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

Manufacturer of custom made draperies.

THE NAMES OF THE OFFICERS ARE:

PRESIDENT _____ STREET ADDRESS _____ CITY/STATE _____ ZIP CODE _____

Jorge Medeiros 66 Farnum St. East Providence, R.I. 02914

VICE PRESIDENT _____ STREET ADDRESS _____ CITY/STATE _____ ZIP CODE _____

Marie T. Medeiros Same

SECRETARY _____ STREET ADDRESS _____ CITY/STATE _____ ZIP CODE _____

Marie T. Medeiros Same

TREASURER _____ STREET ADDRESS _____ CITY/STATE _____ ZIP CODE _____

Jorge Medeiros Same

THE NAMES OF THE DIRECTORS ARE:

NAME _____ STREET ADDRESS _____ CITY/STATE _____ ZIP CODE _____

Jorge Medeiros 66 Farnum St., Providence, R.I. 02914

NAME _____ STREET ADDRESS _____ CITY/STATE _____ ZIP CODE _____

Marie T. Medeiros Same

NAME _____ STREET ADDRESS _____ CITY/STATE _____ ZIP CODE _____

NUMBER OF SHARES AUTHORIZED (Rider may be attached)

Number of Shares Class / Series

500

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

Number of Shares Class / Series

100

Date 1/12, 19 95

By: _____

Form 31 1/95

PRINT OR TYPE NAME OF OFFICER SIGNING

TITLE OF OFFICER SIGNING

Jorge Medeiros

Treasurer

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.

JORGE MEDEIROS
387 CHARLES STREET/MARION MFG. CO.
PROVIDENCE RI 02904

PAID

JAN 18 1995 mnc

SECY OF STAT.

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

File Annually
LLC: Sept 1 - Nov 1
CORP: Jan 1 - March 1

Corporate ID 0007095 Annual Report for the year 1994

Name of Business Entity: MARION MFG. CO.

Business entity organized under the laws of the State of R I
Federal Taxpayer Identification Number [REDACTED]
For foreign entity, address and telephone number of principal office

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

387 Charles St
Providence R I 02903
Phone (401) 331 4343

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:
Jorge Medeiros Pres
66 Farnum St
East Providence R I 02914
Brief statement of the character of business conducted in Rhode Island
Mfg Custom Made Draperies
Date of Organization 10-5 11/19/45
Date of Qualification to do business in Rhode Island (if foreign entity):

THE NAMES OF THE OFFICERS ARE:

OFFICER	STREET ADDRESS	CITY/STATE	ZIP CODE
☒ PRESIDENT OR CEO ☒ TREASURER <u>Jorge Medeiros</u>	<u>66 Farnum St E, Providence</u>	<u>R I 02914</u>	
☐ CHAIRMAN OF THE BOARD ☒ VICE PRESIDENT OR MGR <u>Marie T. Medeiros</u>	<u>same</u>	<u>same</u>	
☐ SECRETARY OR TREASURER ☒ SECRETARY OR TREASURER <u>Marie T. Medeiros</u>	<u>same</u>	<u>same</u>	
☐ CHIEF FINANCIAL OFFICER OR CONTROLLER ☒ CHIEF FINANCIAL OFFICER <u>Jorge Medeiros</u>	<u>same</u>	<u>same</u>	

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
<u>Jorge Medeiros</u>	<u>66 Farnum St E, Providence</u>	<u>R I 02914</u>	
<u>Marie T. Medeiros</u>	<u>same</u>	<u>same</u>	

NUMBER OF SHARES AUTHORIZED (If Applicable)	NUMBER OF SHARES ISSUED AND OUTSTANDING (If Applicable)
NUMBER <u>500</u>	NUMBER <u>100</u>
CLASS	CLASS
SERIES	SERIES
PAR VALUE OR WITHOUT PAR <u>No Par</u>	PAR VALUE OR WITHOUT PAR <u>No Par</u>

Date Feb. 1, 1994

By Jorge Medeiros
Treas
CHIEF OF RECORDING

FILED

FEB 15 1994

By CCP 2611

Form 31 1994

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 LLC 3 must be filed.

JORGE MEDEIROS
387 CHARLES STREET/MARION MFG. CO.
PROVIDENCE RI 02904

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903Corporate ID 7095 Annual Report for the year 1993FIRST: The name of the corporation is Marion Mfg Co.SECOND: It is incorporated under the laws of R ITHIRD: Character of business, briefly stated, is Manufacturing custom draperies

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 387 Charles St
Providence R I 02904

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

Name	Office	Address (including number, street, zip code)
Jorge Medeiros	Director	66 Farnum St. E. Providence RI 02914
Marie T. Medeiros	Director	same
Jorge Medeiros	President	same
Marie T. Medeiros	Vice President	same
Marie T. Medeiros	Secretary	same
Jorge Medeiros	Treasurer	same

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
500			No Par Value

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
200			No Par Value

Dated March 1, 1993 19

(Report must be signed by an officer)

Rec'd & Filed MAR 08 1993

Marion Mfg Co

(Name of Corporation)

By [Signature]

Title President

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 0290391
1576

Corporate ID 0007085 Annual Report for the year 1992

FIRST: The name of the corporation is MARION MFG. CO.

SECOND: It is incorporated under the laws of R I

THIRD: Character of business, briefly stated, is Manufacturing Custom Draperies

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 951 No Main St

Providence R I 02904

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

Name

Office

Address (including number, street, zip code)

Jorge Medeiros

Director

66 Farnum St East Providence

Marie Medeiros

Director

66 Farnum St East Providence

Director

Jorge Medeiros

President

Marie Medeiros

Vice President

Marie Medeiros

Secretary

Jorge Medeiros

Treasurer

SEVENTH: Number of Shares authorized:

No. of Shares

Class

Series

Par Value
or statement that
shares are without
par value

100

PAID

None

EIGHTH: Number of Shares issued:

No. of Shares

Class

Series

Par Value
or statement that
shares are without
par value

100

none

Dated 1/23/92 19

Marion Mfg Co

(Name of Corporation)

By

Title

President

(Report must be signed by an officer)

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0007035 Annual Report for the year 1991

FIRST: The name of the corporation is MARION MFG CO

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is Manufacturing Custom Draperies

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 951 No Main St 02904 Providence

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

Name	Office	Address (including number, street, zip code)
Jorge Medeiros	Director	66 Farnum St East Providence R I 02914
Maria T Medeiros	Director	Same
Jorge Medeiros	President	same
Maria T Medeiros	Vice President	same
Maria T Medeiros	Secretary	same
Jorge Medeiros	Treasurer	same

SEVENTH: Number of Shares authorized:

No of Shares	Class	Series	Par Value or statement that shares are without par value
100			no par value

EIGHTH: Number of Shares issued:

No of Shares	Class	Series	Par Value or statement that shares are without par value
100			no par value

Dated 1/7/91 19

Marion Mfg Co.

(Name of Corporation)

By

Title President

(Report must be signed by an officer)

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0007095 Annual Report for the year 1990

FIRST: The name of the corporation is MARION MFG CO

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is Manufacture custom draperies

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 951 No Main St

Providence R I 02904

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

Name

Office

Address (including number, street, zip code)

Maxwell Morgan Director 15 Sheffield Ave Pawtucket RI 02860

E. Barbara Morgan Director 15 Sheffield Ave Pawtucket R I 02860

Director

Maxwell Morgan President

E Barbara Morgan Vice President

Maxwell Morgan Secretary

E. Barbara Morgan Treasurer

SEVENTH: Number of Shares authorized:

No. of Shares

Class

Series

Par Value
or statement that
shares are without
par value

500

EIGHTH: Number of Shares issued:

100

No. of Shares

Class

Series

Par Value
or statement that
shares are without
par value

100

PAID
JAN 17 1990
SECY OF STATE

Dated 1/15/90 19

Marion Mfg Co

(Name of Corporation)

By

Title

(Report must be signed by an officer)

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0007095 Annual Report for the year 1989

FIRST: The name of the corporation is MARION MFG. CO.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is Manufacturing Draperies

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 951 No Main St Providence 02904

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

Name	Office	Address (including number, street, zip code)
Maxwell Morgan	Director	15 Sheffield Ave Pawtucket R I 02860
E Barbara Morgan	Director	Same
	Director	
Maxwell Morgan	President	Same
	Vice President	
Maxwell Morgan	Secretary	Same
E Barbara Morgan	Treasurer	Same

SEVENTH: Number of Shares authorized:

No. of Shares	Class
500	

PAID
FEB 10 1989
SEC'Y OF STATE
No Par

Par Value
or statement that
shares are without
par value

EIGHTH: Number of Shares issued:

No. of Shares	Class
200	

Series

Par Value
or statement that
shares are without
par value

No Par

Dated Feb. 1, 1989 19

Marion Mfg Co

(Name of Corporation)

By

Title

(Report must be signed by an officer)

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903Corporate ID 7095Annual Report for the year 1988FIRST: The name of the corporation is MARION MFG. CO.SECOND: It is incorporated under the laws of Rhode IslandTHIRD: Character of business, briefly stated, is Manufacturing Custom Draperies

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 951 North Main St Providence 02904

SIXTH: Names and addresses of its directors and officers:

(Attach rider if necessary)

Name

Office

Address (including number, street, zip code)

Maxwell Morgan

Director

15 Sheffield Ave Pawtucket R I

E Barbara Morgan

Director

Same

Director

E Barbara Morgan

President

Same

Vice President

Maxwell Morgan

Secretary

E Barbara Morgan

Treasurer

Same

SEVENTH: Number of Shares authorized:

No. of Shares

Class

Series

Par Value
or statement that
shares are without
par value

500

No

EIGHTH: Number of Shares issued:

No. of Shares

Class

Par Value
or statement that
shares are without
par value

200

No

Dated Jan. 28, 1988 19

Marion Mfg Co

(Name of Corporation)

By

E Barbara Morgan

Title

President

(Report must be signed by an officer)

Filing Fee \$15.00

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 ID 7095 Annual Report for the year 1987

FIRST: The name of the corporation is MARION MFG. CO.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is Manufacture Custom Draperies

FOURTH: If foreign corporation, address of its principal office.....

FIFTH: Business address in Rhode Island 951 No Main St Providence R I 02904

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

Name	Office	Address (including number, street, zip code)
E Barbara Morgan	Director	15 Sheffield Ave Pawtucket R I 02860
Maxwell Morgan	Director	Same
	Director	
E Barbara Morgan	President	
	Vice President	
E Barbara Morgan	Secretary	Same
E Barbara Morgan	Treasurer	Same

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
1000 500		PAID	No Par

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
200		PAID	No Par

Dated 1/13/87 19 MAR 20 ENT'D Marion Mfg Co.
(Name of Corporation)

By E Barbara Morgan

Title Treas

(Report must be signed by an officer)

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 7095 Annual Report for the year 1986

FIRST: The name of the corporation is MARION MFG. CO.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is Manufacturing Custom Made Draperies

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 951 No Main St Providence RI 02904

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

Name

Office

Address (including number, street, zip code)

Director

Director

Director

E Barbara Morgan

President

15 Sheffield Ave Pawtucket R I 02860

Michael J Morgan

Vice President

26 Morgan Circle Amherst Mass 01002

E Barbara Morgan

Secretary

15 Sheffield Ave Pawt. RI 02860

E Barbara Morgan

Treasurer

15 Sheffield Ave Pawt RI 02860

SEVENTH: Number of Shares authorized:

No. of Shares

Class

01/16/86

Series

Par Value
or statement that
shares are without
par value

NO

EIGHTH: Number of Shares issued:

No. of Shares

Class

PAID

Series

Par Value
or statement that
shares are without
par value

No

200

ANRE
CHER
0217A001

Dated 1/10/86 19

Marion Mfg Co.

(Name of Corporation)

By

E Barbara Morgan

Title Pres.

(Report must be signed by an officer)

Filing Fee \$15.00

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 ID 7095

Annual Report for the year 1985

FIRST: The name of the corporation is MARION MFG. CO.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is Manufacture Custom Draperies

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 951 No MainSt

Providence R I 02904

SIXTH: Names and addresses of its directors and officers:

(Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
Maxwell Morgan	Director	15 Sheffield Ave Pawtucket R I 02860
E Barbara Morgan	Director	Same
E Barbara Morgan	Director	"
E Barbara Morgan	President	"
Michael J Morgan	Vice President	26 Morgan Circle Amherst Mass
E Barbara Morgan	Secretary	
E Barbara Morgan	Treasurer	

SEVENTH: Number of Shares authorized:

No. of Shares
~~1000~~ 400

Class

Series

Par Value
or statement that
shares are without
par value

No

EIGHTH: Number of Shares issued:

No. of Shares
100

Class

Series

Par Value
or statement that
shares are without
par value

No

Dated 2/1/85 19

Marion Mfg Co

(Name of Corporation)

By *Barbara Morgan*

Title President

(Report must be signed by an officer)

Form 31 1/85

MARION MFG. CO.
E. BARBARA MORGAN
951 NORTH MAIN STREET
PROVIDENCE RI

02/13/85 PAID

ANRE
CHEK
0503A001
15.00

Filing fee: \$15 00

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 the corporation is

Marion Mfg Co.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is
Manufacture Draperies

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island

951 No Main St Providence 02904

SIXTH: Names and addresses of its directors and officers:

(Addresses must include street and number, if any)

Name	Office	Address
Maxwell Morgan	Director	15 Sheffield Ave Pawtucket R I
E Barbara Morgan	Director	15 Sheffield Ave Pawtucket R I
	Director	
Michael Morgan	President	26 Morgan Circle Amherst MA
	Vice President	
E Barbara Morgan	Secretary	
E Barbara Morgan	Treasurer	

(If additional space is needed, attach rider)

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100 500			No Par

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	30		No Par

Dated: 1/26/84

Marion Mfg Co

(Name of Corporation)

By

Title

Treas

(Report must be signed by an officer)

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

Filing fee: \$15.00

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 **1983**

FIRST: The name of the corporation is **Marion Mfg Co**

SECOND: It is incorporated under the laws of **R I**

THIRD: Character of business, briefly stated, is **Manufacture of
Custom Draperies**

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island (blank reports will be mailed to this
address) **951 No Main St Providence R I 02904**

SIXTH: Names and addresses of its directors and officers:

(Addresses must include street and number, if any)

Name	Office	Address	02860
Maxwell Morgan	Director	15 Sheffield Ave Pawtucket R I	
E Barbara Morgan	Director	15 Sheffield Ave Pawt R I	02860
	Director		
Michale J Morgan	President	113 Kenilworth Way Merion PA	19066
	Vice President		
E Barbara Morga n	Secretary	15 Sheffield Ave Pawt R I	02860
E Barbara Morgan	Treasurer	15 Sheffield Ave Pawt R I	02860

(If additional space is needed, attach rider)

SEVENTH: Number of Shares authorized:

No. of Shares
500

Class

Series

Par Value
or statement that
shares are without
par value

No Par

JUL 12 1983

EIGHTH: Number of Shares issued:

No. of Shares
100

Class

Series

Par Value
or statement that
shares are without
par value

No

Dated: **6/13/83**

19

Marion Mfg Co

(Name of Corporation)

By **E. Barbara Morgan**
Title **TREASURER**

(Report must be signed by an officer)

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

Filing fee: \$15.00

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 1982

FIRST: The name of the corporation is

Marion Mfg Co.

SECOND: It is incorporated under the laws of R I

THIRD: Character of business, briefly stated, is Manufacture Draperies

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island (blank reports will be mailed to this address) 951 No Main St Providence R I 02904

SIXTH: Names and addresses of its directors and officers:

(Addresses must include street and number, if any)

Name	Office	Address
Maxwell Morgan	Director	15 Sheffield Ave Pawtucket
E Barbara Morgan	Director	same
	Director	
Michael J Morgan	President	113 Kenilworth Rd Marion PA 19066
XXXXXXXXXXXX	Vice President	Pawtucket R I
E Barbara Morgan	Secretary	"
E Barbara Morgan	Treasurer	

(If additional space is needed, attach rider)

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series
500	1	

Par Value
or statement that
shares are without
par value

NO PAR

OCT 6 1982

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series
100	1	

Par Value
or statement that
shares are without
par value

NO PAR

Dated: Oct. 4, 1982

19

10

-5

82

Marion Mfg Co.

(Name of Corporation)

By

TREAS

Title

(Report must be signed by an officer)

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

State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT

OF

Marion Mfg Co.

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 Marion Mfg Co.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: The address of its registered office in Rhode Island is

951 North Main St Providence

and the name of its registered agent in Rhode Island at such address is

E. Barbara Morgan

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 manufacturing draperies

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

Name	Office	Address
Maxwell Morgan	Director	15 Sheffield Ave Pawtucket R I
E Barbara Morgan	Director	same
	Director	
	Director	
	Director	
Michael J. Morgan	President	same
E Barbara Morgan	Vice President	X
E Barbara Morgan	Secretary	"
E Barbara Morgan	Treasurer	"

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	9 15 81	Series	Par Value per Share or Statement that Shares are without Par Value
600	1		1	NONE
				NO Par Value

SEP 21 1981

A.

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:

<u>Number of Shares</u>	<u>Class</u>	<u>Series</u>	<u>Par Value per Share or Statement that Shares are without Par Value</u>
200	1	1	No Par Value

Dated Sept. 14 , 19 81

Marion Mfg Co.

(NAME OF CORPORATION)

By

E. B. Mason

Its Sec.

Filing fee: \$15.00

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

MARION MFG. CO.

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 *MARION MFG. CO.*

SECOND: It is incorporated under the laws of *R.I.*

THIRD: The address of its registered office in Rhode Island is *951
N MAIN ST PROVIDENCE*

and the name of its registered agent in Rhode Island at such address is
SAME

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 *MANUFACTURING*

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

Name	Office	Address
<i>MAXWELL MORGAN</i>	Director	<i>15 SHEFFIELD AVE PROVIDENCE</i>
<i>E. BRASHER MORGAN</i>	Director	<i>SAME</i>
	Director	
	Director	
	Director	
<i>MAXWELL MORGAN</i>	President	<i>SAME</i>
<i>E. BRASHER MORGAN</i>	Vice President	
<i>MAXWELL MORGAN</i>	Secretary	
<i>E. BRASHER MORGAN</i>	Treasurer	

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
<i>100</i>			<i>NO PAR VALUE</i>

AUG 14 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:

<u>Number of Shares</u>	<u>Class</u>	<u>Series</u>	<u>Par Value per Share or Statement that Shares are without Par Value</u>
100			NO PAR VALUE

Dated 8/12, 1900 Marion Mfg Co
(NAME OF CORPORATION)
By Maxwell Morgan
Its Sec.

Filing fee: \$15.00

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**

MARION MFG CO.

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 MARION MFG CO.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: The address of its registered office in Rhode Island is 128 NORTH
MAIN ST - PROVIDENCE, R.I.

and the name of its registered agent in Rhode Island at such address is

MAXWELL MORGAN

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 DRAPE'S & SLIPCOVERS

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

Name	Office	Address
	Director	
	Director	
	Director	<u>15 SHEFFIELD AVE</u>
	Director	
	Director	
	Director	
<u>MAXWELL MORGAN</u>	President	<u>PAWTUCKET, R.I.</u>
<u>E. BARBARA MORGAN</u>	Vice President	<u>PAWTUCKET, RI 02860</u>
<u>MAXWELL MORGAN</u>	Secretary	<u>PAWTUCKET, R.I.</u>
<u>E. BARBARA MORGAN</u>	Treasurer	<u>PAWTUCKET, R.I.</u>

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	3 Series	Par Value per Share or Statement that Shares are without Par Value
<u>500</u>	<u>1</u>	<u>79 1</u>	<u>NO PAR</u>

.....1500
7542A14.....1500BL

MAR 13 1979

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:

<u>Number of Shares</u>	<u>Class</u>	<u>Series</u>	<u>Par Value per Share or Statement that Shares are without Par Value</u>
100	1	1	No PAR

Dated Feb. 19, 1979 MARION MFG. CO.
(NAME OF CORPORATION)

By Marshall Morgan
Its Pres

Filing fee: \$15.00

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

MARION MFG CO

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

MARION MFG CO

SECOND: It is incorporated under the laws of

R.I.

THIRD: The address of its registered office in Rhode Island is

128 NO MAIN ST PROVIDENCE 02903

and the name of its registered agent in Rhode Island at such address is

SAME

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

DRAPERY MANUFACTURING

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

Name	Office	Address
<i>MAXWELL MORGAN</i>	Director	<i>15 SHEFFIELD AVE Prov. R.I.</i>
<i>E. BARBARA MURBAN</i>	Director	<i>SAME DOUGL</i>
	Director	
	Director	
	Director	
	Director	
<i>M MORGAN</i>	President	
<i>E B MORGAN</i>	Vice President	
<i>M MORGAN</i>	Secretary	
<i>E B MORGAN</i>	Treasurer	

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
<i>400</i>			<i>NO PAR</i>

JAN 23 1978
[Signature]

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:

<u>Number of Shares</u>	<u>Class</u>	<u>Series</u>	<u>Par Value per Share or Statement that Shares are without Par Value</u>
400			NO PAR

Dated 1/12, 1978

MARION MFG CO
(NAME OF CORPORATION)
By Maxwell M. Mear
Its President

Filing fee: \$15.00

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

MARION MFG CO

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 MARION MFG CO

SECOND: It is incorporated under the laws of R.I.

THIRD: The address of its registered office in Rhode Island is

128 NO MAIN ST PROVIDENCE

and the name of its registered agent in Rhode Island at such address is

MAXWELL MORGAN

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 DRAPES

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

Name	Office	Address
MAXWELL MORGAN	Director	15 SHEFFIELD ST
E. BARBARA MORGAN	Director	PAWTCHEE R.I.
	Director	02060
	Director	
	Director	
	Director	
MAXWELL MORGAN	President	
E. BARBARA MORGAN	Vice President	
MAXWELL	Secretary	
E. BARBARA	Treasurer	

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

100

NO PAR VALUE

DEC 27 1977

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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:

<u>Number of Shares</u>	<u>Class</u>	<u>Series</u>	<u>Par Value per Share or Statement that Shares are without Par Value</u>
100			NO PAR VALUE

Dated DEC 20, 1977

By MAXWELL MOYER
Its President
MARION MFG CO
(NAME OF CORPORATION)

11-60

DEC 20 1977

Filing fee: \$15.00

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

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

MARION MFG CO

SECOND: It is incorporated under the laws of

RHODE ISLAND

THIRD: The address of its registered office in Rhode Island is

128 NO. MAIN ST. PROVIDENCE R 02903

and the name of its registered agent in Rhode Island at such address is

MAXWELL MORGAN

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

MANUFACTURING

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

Name	Office	Address
	Director	
	Director	
	Director	
	Director	
	Director	
	Director	
MAXWELL MORGAN	President	15 SHEFFIELD AVE PROVIDENCE R
E. BORISAN MORGAN	Vice President	"
MAXWELL MORGAN	Secretary	"
E. BORISAN MORGAN	Treasurer	"

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

~~200~~
400

NO PAR VALUE

OCT 14 1977

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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:

<u>Number of Shares</u>	<u>Class</u>	<u>Series</u>	<u>Par Value per Share or Statement that Shares are without Par Value</u>
200			NO PAR

Dated Oct 13, 1977

By

MARION MFG CO
(NAME OF CORPORATION)
Maxwell Meyer
Its President

NOT 14-77-84 OCT 14 1977

Filing fee: \$15.00

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

MARION MFG CO

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 Marion Mfg Co

SECOND: It is incorporated under the laws of Rhode Island

THIRD: The address of its registered office in Rhode Island is 128 No Main St
Providence R I 02903

and the name of its registered agent in Rhode Island at such address is
Maxwell Morgan

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 Manufacturing

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

Name	Office	Address
Maxwell Morgan	Director	15 Sheffield Ave Pawtucket R I 02860
E Barbara Morgan	Director	same
	Director	
	Director	
	Director	
	Director	
Maxwell Morgan	President	"
E Barbara Morgan	Vice President	"
Maxwell Morgan	Secretary	"
E Barbara Morgan	Treasurer	"

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
500	1	1	No Par
500	1	1	✓

FEB 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:

<u>Number of Shares</u>	<u>Class</u>	<u>Series</u>	<u>Par Value per Share or Statement that Shares are without Par Value</u>
100	1	1	No Par
(57)	1	1	

Dated Feb. 13, 1975, 19

Marion Mfg Co

(NAME OF CORPORATION)

By

Maxwell Mayer
Its SEC.

PR 17-75 REC-OF STATE 812 48 *****15.00

Filing fee: \$15.00

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

Marion Mfg. Co.

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 **Marion Mfg. Co.**

SECOND: It is incorporated under the laws of **Rhode Island**

THIRD: The address of its registered office in Rhode Island is **128 No. Main St.
Providence**

and the name of its registered agent in Rhode Island at such address is
Maxwell Morgan

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 **Manufacturing Draperies**

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

Name	Office	Address
Maxwell Morgan	Director	15 Sheffield Ave. Pawtucket R I
E. Barbara Morgan	Director	same
	Director	
	Director	
	Director	
Maxwell Morgan	President	"
E. Barbara Morgan	Vice President	"
Maxwell Morgan	Secretary	"
E. Barbara Morgan	Treasurer	"

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
500			NONE

JAN 17 1974

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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:

<u>Number of Shares</u>	<u>Class</u>	<u>Series</u>	<u>Par Value per Share or Statement that Shares are without Par Value</u>
100			NONE

Dated Jan. 15, 1974, 19

Marion Mfg. Co.

(NAME OF CORPORATION)

By

Marion Moyer

Its

President

JAN 24 1974
SEC. OF
STATE
004 67***15.00

Filing fee: \$15.00

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

Marion Mfg.Co.

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 Marion Mfg.Co.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: The address of its registered office in Rhode Island is 128 No. Main St
Providence
and the name of its registered agent in Rhode Island at such address is
Maxwell Morgan

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 Manufacturing slip covers and drapes

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

Name	Office	Address
Maxwell Morgan	Director	15 Sheffield Ave Pawtucket RI
E Barbara Morgan	Director	15 Sheffield Ave Pawtucket R I
	Director	
	Director	
	Director	
Maxwell Morgan	President	
E Barbara Morgan	Vice President	
Maxwell Morgan	Secretary	SAME
E Barbara Morgan	Treasurer	

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
500	1		NO

FEB 23 1973

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:

<u>Number of Shares</u>	<u>Class</u>	<u>Series</u>	<u>Par Value per Share or Statement that Shares are without Par Value</u>
100	1		NO

Dated Feb. 12, 19 73

Marion Mfg. Co.

(NAME OF CORPORATION)

By

Maxwell Morgan

Its Pres & Sec.

MAR -6-73 STATE 690 A3***15.00

Filing fee: \$15.00

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**

MARION MFG. CO.

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

MARION MFG. CO.

SECOND: It is incorporated under the laws of

R.I.

THIRD: The address of its registered office in Rhode Island is

128 N. Main ST. PROVIDENCE

and the name of its registered agent in Rhode Island at such address is

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

MANUFACTURER OF DRIVES & SLIP COVERS

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

Name	Office	Address
MAXWELL MORTON	Director	15 STIFFIELD AVE
E. Barbara MORTON	Director	WATKINS, R.I.
	Director	
	Director	
	Director	
MAXWELL MORTON	President	
E. Barbara MORTON	Vice President	
Maxwell MORTON	Secretary	
E. Barbara MORTON	Treasurer	

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
500	1	1	NO

f MAR 1 1972

<u>Number of Shares</u>	<u>Class</u>	<u>Series</u>	<u>Par Value per Share or Statement that Shares are without Par Value</u>
100	1	1	1.00

Maxwell Mfg Co.
(NAME OF CORPORATION)
By Maxwell Morgan
Its Pres.

NY 17-77-Sp, 16: 59***C...