STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State - Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040 ~ **Email:** corporations@sos.ri.gov ~ **Website:** www.sos.ri.gov

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR __2012__

Filing Period: January 1 - March 1 · **This report must be typed or printed legibly.**
Filing Fee: $50.00 · **FAILURE TO FILE THIS REPORT BY MARCH 31 WILL RESULT IN A $25.00 PENALTY FEE.**

1. Entity ID No.	2. Exact name of the Corporation		
000295005	**22nd Century Technologies, Inc.**		

3. Principal office address	City	State	Zip
1 Executive Drive, Suite 285	**Somerset**	**NJ**	**08873**

4. Business Phone No.	5. State of Incorporation
732-537-9191	**New Jersey**

6. Brief description of the character of business conducted in Rhode Island
Information Technology Consulting and Software Development

President Name			Vice-President Name		
Satvinder Singh			**None**		
Street Address			Street Address		
1 Executive Drive, Suite 285					
City **Somerset**	State **NJ**	Zip **08873**	City	State	Zip
Secretary Name **None**			Treasurer Name **None**		
Street Address			Street Address		
City	State	Zip	City	State	Zip

Director Name **None**			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

	NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.	100	Common	0
	400	Common	0

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

FILED

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BY _175749_

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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.

Kulpreet Singh   **07/26/2012**
Signature of Authorized Representative   Date

Kulpreet Singh (Business Development Manager)
Print or Type Name of Authorized Representative

Form No. 630
Revised: 01/2012