

1. Corporate ID No.

3. Street Address Principal Business Office 39 PHENIX AVENUE

96289

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

02920

## PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR \_\_\_\_\_ 2008

2, Name of Corporation
A DOG'S BEST FRIEND, INC.

Filing Period: January 1 - March 1 • Filing Fee: \$50.00\* THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK \* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

CRANSTON

RI

4. Business Phone No. 4019448428			S. State of Incorporation RHODE ISLAND			
G. Brief Description of the Character TO PROVIDE GROOMING						
7. NAMES AND ADDRESSE	S OF THE OFFI	CERS: ("X" BOX FOR	ATTACHMENT) 🔲 FILL IN	SPACES BEFORE USING	ATTACHMENTS	
President Name			Vice President Name			
Cheryl Vadovsky			Cheryl Vadovsky			
Street Address 1368 Plainfiled Pike			Street Address 1368 Plainfiled Pike			
යාල Greene	State RI	<i>2ip</i> 02827	Greene	State RI	<i>շւր</i> 02827	
Secretary Name Cheryl Vadovsky			Treasurer Name Cheryl Vadovsky			
Street Address 1368 Plainfiled Pike			Street Address 1368 Plainfiled Pike			
City State Zip			: City State Zip			
Greene	RI	02827	Greene	RI	02827	
8. NAMES AND ADDRESSE Director Name	S OF THE DIRE	CTORS: ("X" BOX FO	R ATTACHMENT)  FILL I	N SPACES BEFORE USING	G ATTACHMENTS	
Streei Address			Street Address			
City	State	Zip	City	State	Zψ	
Director Name		<b></b>	Director Name			
Street Address			Street Address			
City	State	Ζip	City	State	Zip	
9. SHARES AUTHORIZED AUTHORIZED SHARES	 ("X" BOX FOR	ATTACHMENT)		 D <i>("X" BOX FOR ATTACI</i> ECTION <u>MUST</u> BE COMPLETED		
Number of Shares	GhasyScries	Par Value	Number of Shares	Class/Series	Par Value	
1 <b>0</b> 00 \$1.00 PAR VALUE			1000	Common	1.00	
		448444448448844884	(1) 4.5 (1) 14 Table			
This report must be executed this report must be executed the executed for			Under penalty of including any ac	perjury, I declare and affirm	that I have examined this report the statement of the sta	
Check No. 79	6	· 	Cheryl Vado	ovsky		
By M	nes			Print or Type Name		
	VINO GOLL STAT		President			
FOR SECRETARY OF S	IAIE USE UNLI		Title		Form 630 Rev. 12/06	