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

Corporations Division
148 W. River St.
Providence, RI 02904-2615
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2008

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.***

1. Corporate ID No.	2. Name of Corporation		
74434	Jomay, Inc.		
3. Street Address Principal Business Office	City	State	Zip
66Libera Street	Cranston	RI	02920
4. Business Phone No.	5. State of Incorporation		
(401) 464-4411	Rhode Island		

6. Brief Description of the Character of Business Conducted in Rhode Island
Design, manufacture, production and distribution of all forms of jewelry

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

President Name	Street Address	City	State	Zip
Joseph E. Lavallee	409 Tunk Hill Rd.	Hope	RI	02831

Vice President Name	Street Address	City	State	Zip
Marian P. Lavallee	409 Tunk Hill Rd.	Hope	RI	02831

Secretary Name	Street Address	City	State	Zip
Marian P. Lavallee	409 Tunk Hill Rd.	Hope	RI	02831

Treasurer Name	Street Address	City	State	Zip
Joseph E. Lavallee	409 Tunk Hill Rd.	Hope	RI	02831

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

Director Name	Street Address	City	State	Zip
Marian P. Lavallee	409 Tunk Hill Rd.	Hope	RI	02831

Director Name	Street Address	City	State	Zip
Joseph E. Lavallee	409 Tunk Hill Rd.	Hope	RI	02831

Director Name	Street Address	City	State	Zip

Director Name	Street Address	City	State	Zip

9. SHARES AUTHORIZED ***("X" BOX FOR ATTACHMENT)*** ☐

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value
600 Comm No Par Value		

10. SHARES ISSUED ***("X" BOX FOR ATTACHMENT)*** ☐

ISSUED SHARES — THIS SECTION MUST BE COMPLETED

Number of Shares	Class/Series	Par Value
600	Common	
THIS SEC	MUST BE COM	

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.

[redacted] [redacted]

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.

Joseph E. Lavallee 1-31-08

Signature *Date*

Joseph E. Lavallee
Print or Type Name

President
Title

[redacted]

FILED
File Date FEB 08 2008
Check No.
By: BS-9871

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