

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2008

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

* 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. 44913		2. Name of Corporation Capital Design, Inc.			
3. Street Address Principal Business Office 148 West River Street, Suite 7			City Providence	State RI	Zip 02904
4. Business Phone No. 270-6777		5. State of Incorporation RHODE ISLAND			
6. Brief Description of the Character of Business Conducted in Rhode Island MANUFACTURE AND SALE OF JEWELRY PRODUCTS, METAL AND SIMILAR PRODUCTS					
7. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Judith S. Mann			Vice President Name Robert Mann		
Street Address 148 West River Street, Suite 7			Street Address 148 West River Street, Suite 7		
City Providence	State RI	Zip 02904	City Providence	State RI	Zip 02904
Secretary Name Richard S. Mittleman			Treasurer Name Judith Mann		
Street Address 56 Exchange Terrace			Street Address 148 West River Street, Suite 7		
City Providence	State RI	Zip 02903	City Providence	State RI	Zip 02904
8. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> 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
9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
AUTHORIZED SHARES			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
600 NO PAR VALUE			300	Class A	none
			300	Class B	none

RECEIVED
SECRETARY OF STATE
CORPORATIONS DIV
FEB 11 11 PM 2009

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.



44913 DBC FILED 2:22:01 AM
File Date
FEB 12 2008
Check No. DS-4455
By: _____
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: Judith S. Mann Date: 2/11/08
Print or Type Name: Judith S. Mann
Title: President