



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
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. 144037		2. Name of Corporation Self Discovery Express, Ltd.			
3. Street Address Principal Business Office 21 Gosset's Turn Drive			City Middletown	State RI	Zip 02842
4. Business Phone No. (401) 846-5545		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island to help others to de-stress, have fun and enjoy life through art, sound, movement and more					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Patricia Cerchio-Vieira			Vice President Name none		
Street Address 21 Gosset's Turn Drive			Street Address		
City Middletown	State RI	Zip 02842	City	State	Zip
Secretary Name Patricia Cerchio-Vieira			Treasurer Name Patricia Cerchio-Vieira		
Street Address 21 Gosset's Turn Drive			Street Address 21 Gosset's Turn Drive		
City Middletown	State RI	Zip 02842	City Middletown	State RI	Zip 02842
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"/>			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
100 No par value			10	common	none
			THIS SECTION MUST BE COMPLETED		

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
File Date **FEB 28 2008**
Check No. **1031**
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.

Patricia Cerchio-Vieira
Signature _____ Date _____

Patricia Cerchio-Vieira

Print or Type Name

President

Title