



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

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. 160204		2. Name of Corporation Fur Kidz, Ltd.	
3. Street Address Principal Business Office 49 North Shore Drive		City East Providence	State RI
4. Business Phone No. 401-433-5121		5. State of Incorporation Rhode Island	
6. Brief Description of the Character of Business Conducted in Rhode Island Pet grooming			
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name Lucille G. Dalpe		Vice President Name Judith A. Butterman	
Street Address 49 North Shore Drive		Street Address 49 North Shore Drive	
City East Providence	State RI	City East Providence	State RI
Secretary Name Lucille G. Dalpe		Treasurer Name Judith A. Butterman	
Street Address 49 North Shore Drive		Street Address 49 North Shore Drive	
City East Providence	State RI	City East Providence	State RI
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
Director Name Lucille G. Dalpe		Director Name Judith A. Butterman	
Street Address 49 North Shore Drive		Street Address 49 North Shore Drive	
City East Providence	State RI	City East Providence	State RI
Director Name Lucille G. Dalpe		Director Name Judith A. Butterman	
Street Address 49 North Shore Drive		Street Address 49 North Shore Drive	
City East Providence	State RI	City East Providence	State RI
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 <u>MUST</u> BE COMPLETED	
Number of Shares	Class/Series	Par Value	
1000	Common	\$0.01 par value	
1000		Common	\$0.01 par value

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 _____
 Check No. **FEB 29 2008**
 By: **VS Limited**
 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 Lucille G. Dalpe Date 2-24-08

Lucille G. Dalpe
Print or Type Name

President
Title