

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 per	alty fee of \$25.00.				
1. Corporate ID No. 139050		2. Name of Corporation Cindy's Fashions, Inc.				
3. Street Address Principal Business Office 222 PHEASANT DRIVE			City Cranston	State RI	Zip 02920	
4. Business Phone No. 5. State of Incorporat 401-434-0334 Rhode Island			ion			
V	baracter of Business Conduct Ial Fashions and Wedd					
7. NAMES AND ADDI	RESSES OF THE OFFIC	CERS: ("X" BOX FOR A	TTACHMENT) 📋 FILL IN	SPACES BEFORE USING	ATTACHMENTS	
President Name			Vice President Name			
Aldo W. Segama			Ana Segama			
Street Address 222 Pheasant Drive			Street Address 222 Pheasant Drive			
Cranston	State RI	^{Zip} 02920	City Cranston	State Ri	02920	
Secretary Name Aldo W. Segama	•••••		Treasurer Name Aldo W. Segama			
Street Address 222 Pheasant Drive			Street Address 222 Pheasant Drive		26 V)	
City Cranston	State RI	<i>z_{ij}</i> , 02920	Guy Cranston	State RI	<i>Zφ</i>	
8. NAMES AND ADDI	RESSES OF THE DIREC	CTORS: ("X" BOX FOR	ATTACHMENT) [FILL II	N SPACES BEFORE USIN	G ATTAGEMENTS 2	
Director Name			Director Name	•	5 36	
Aldo W. Segama		Management	Ana Segama			
Street Address			Street Address			
222 Pheasant Driv		T.+.	222 Pheasant Drive		\``	
City Cranston	State RI	^{Ζφ} 02920	City Cranston	State RI	2 ⁴⁰	
Director Name			Director Name		5	
Street Address			Street Address			
Сйу	State	Zip	Сйу	State	Zip	
9. SHARES AUTHORI AUTHORIZED SHARES	ZED ("X" BOX FOR A	ATTACHMENT)) ("X" BOX FOR ATTAC. ECTION <u>MUST</u> BE COMPLETED		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value	
8000 cwp common 0.01			200	common	0.01	
•		e corporation by an author corporation by the recei	orized representative. If the over or trustee.	corporation is in the hand	s of a receiver or trustee,	

	Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements
File Date FILED	contained herein are true and correct.
Check No. MAR 0 7 2008	Signature Date Aldo W. Segama
By:	Print or Type Name
FOR SECRETARY OF STATE USE ONLY	President
TOR OFFICE OF STATE COLUMN	Title