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.	2. Name of Corporation			
90991	QUARTZ NATURE, INC.			
3. Street Address Principal Business Office		City	State	Zip
ONE SHIP STREET		PROVIDENCE	RI	02903
4. Business Phone No.	5. State of Incorporation			
(401) 273-5155	RHODE ISLAND			

6. Brief Description of the Character of Business Conducted in Rhode Island
TO MANUFACTURE, DESIGN, STYLE PRODUCE, PROCESS, PREPARE MERCHANDISE

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

President Name			Vice President Name		
YVES TRUDEAU					
Street Address			Street Address		
ONE SHIP STREET					
City	State	Zip	City	State	Zip
PROVIDENCE	RI	02903			
Secretary Name			Treasurer Name		
YVES TRUDEAU			YVES TRUDEAU		
Street Address			Street Address		
ONE SHIP STREET			ONE SHIP STREET		
City	State	Zip	City	State	Zip
PROVIDENCE	RI	02903	PROVIDENCE	RI	02903

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

Director Name			Director Name		
YVES TRUDEAU					
Street Address			Street Address		
ONE SHIP STREET					
City	State	Zip	City	State	Zip
PROVIDENCE	RI	02903			
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip

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

AUTHORIZED SHARES			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
Number of Shares	*Class/Series*	*Par Value*	*Number of Shares*	*Class/Series*	*Par Value*
8,000 COMMON NO PAR VALUE			100	COMMON	NO PAR

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.

Feb 04- 2008
Signature *Date*

YVES TRUDEAU
Print or Type Name

[redacted] PRESIDENT
Title

FAXED
File Date JUL 01 2008
Check No. By 062781
By:
FOR SECRETARY OF STATE USE ONLY

Form 630 Rev. 12/06