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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 2009

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
0004694	CONNETTI ENTERPRISE INC.

3. Street Address Principal Business Office	City	State	Zip
57 Colwell Road	Greenville	R.I.	02828

4. Business Phone No.	5. State of Incorporation
401 949 0100	RHODE ISLAND

6. Brief Description of the Character of Business Conducted in Rhode Island

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

President Name	Vice President Name
DONALD E CONNETTI	DONALD E CONNETTI
Street Address: 60 Colwell	Street Address: 60 Colwell Road
City: Greenville State: RI Zip: 02828	City: Greenville State: RI Zip: 02828
Secretary Name	**Treasurer Name**
DONALD E CONNETTI	DONALD E CONNETTI
Street Address: 60 Colwell Road	Street Address: 60 Colwell Road
City: Greenville State: RI Zip: 02828	City: Greenville State: RI Zip: 02828

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

Director Name	Director Name
DONALD E CONNETTI	DONALD E CONNETTI
Street Address: 60 Colwell Road	Street Address: 60 Colwell Road
City: Greenville State: RI Zip: 02828	City: Greenville State: RI Zip: 02828
Director Name	**Director Name**
DONALD E CONNETTI	DONALD E CONNETTI
Street Address: 60 Colwell Road	Street Address: 60 Colwell Road
City: Greenville State: RI Zip: 02828	City: Greenville State: RI Zip: 02828

9. SHARES AUTHORIZED: 600 COMMON NO PAR VALUE

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

ISSUED SHARES — THIS SECTION MUST BE COMPLETED

This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.

Number of Shares	Class/Series	Par Value
200	COMMON	NO 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.

[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.

Signature: Donald E Connetti Date: 1/9/09

Print or Type Name: DONALD E CONNETTI

[redacted] Title: President, Treasurer, Director

File Date	FILED
Check No.	JAN 12 2009
By:	By 7193

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30152-6-290907

Form 630 Rev. 08/08