

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 falling 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 benalty fee of \$25.00.

| 1. Corporate ID No.<br>134759  | 2. Name of Corporation APHRODITE, INC. |   |   |   |                         |  |  |
|--|--|---|---|---|-------------------------|--|--|
| 3. Street Address Principal Business Of 25 Company Street              | fice                                   |   | City<br>Warren                                  | State<br>RI                             | <sup>Zip</sup><br>02885 |  |  |
| 4. Business Phone No.<br>401-339-1944                                  |  | 5. State of Incorporation RHODE ISLAND  |   |   |                         |  |  |
| 6. Brief Description of the Character of Freelance Writing, Editing, a | and Design Services                    |   |   |   |                         |  |  |
| 7. NAMES AND ADDRESSES   | OF THE OFFICERS:                       | ("X" BOX FOR ATTAC                      |   | S BEFORE USING ATTA                     | ACHMENTS                |  |  |
| President Name   |  |   | Vice President Name                             |   |                         |  |  |
| Bryna A. Poirier-Rene  |  |   | Bryna A. Poirier-Rene                           |   |                         |  |  |
| Street Address 25 Company Street                                       |  |   | Street Address 25 Company Street                |   |                         |  |  |
| City<br>Warren   | State<br>RI                            | <i>շտ</i><br>02885                      | City<br>Warren                                  | State<br>RI                             | <i>гір</i><br>02885     |  |  |
| Secretary Name<br>Bryna A. Poirier-Rene                                |  |   | Treasurer Name Bryna A. Poirier-Rene            |   |                         |  |  |
| Street Address 25 Company Street                                       |  |   | Street Address 25 Company Street                |   |                         |  |  |
| City<br>Warren   | State<br>RI                            | Zip<br>02885                            | Сііу<br>Warren                                  | State<br>RI                             | Zip<br>02885            |  |  |
| 8. NAMES AND ADDRESSES Director Name Bryna A. Poirier-Rene             | OF THE DIRECTORS                       | : (A BOAFOR AII                         | Director Name                                   | ES BEFORE USING AT                      | IACIMENTS               |  |  |
| Street Address 25 Company Street                                       |  |   | Street Address                                  |   | i                       |  |  |
| Cuy  | State                                  | Zip                                     | City  | State                                   | <b>3</b> <sup>tp</sup>  |  |  |
| Warren   | RI                                     | 02885                                   |   |   | B 60-                   |  |  |
| Director Name  | <b>.</b>                               | *************************************** | Director Name                                   | *************************************** | £ 3.8                   |  |  |
| Street Address   |  |   | Street Address                                  |   | 20                      |  |  |
| City   | State                                  | Zip                                     | City  | State                                   | <b>4</b> 4000           |  |  |
| 9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)  AUTHORIZED SHARES       |  |   | 10. SHARES ISSUED ("X" BOX FOR ATTACHMENT).     |   |                         |  |  |
| Number of Shares   | Class/Series                           | Par Value                               | Number of Shares                                | Class/Series                            | Par Value               |  |  |
| 1,000 \$1.00 PAR VALUE   |  |   | 1,000 \$1.00 PAR VALUE                          |   | 7.01.1500               |  |  |
|  |  |   |   |   |                         |  |  |
| This report must be executed this report must be executed or           | on behalf of the corpo                 | oration by an authorize                 | d representative. If the corpora<br>or trustee. | tion is in the hands of a               | a receiver or trustee,  |  |  |

|           |                                 |       | Under penalty of perjury, I declare and affirm that I have examined thi including any accompanying schedules and statements, and that all statements. | is report, |
|-----------|---------------------------------|-------|---|------------|
| File Date | ELED IN                         |       | contained therein are true and correct.   | atements   |
| Check N   | AN 2 7 2009                     | 10.41 | Bryna A. Poirier-Rene   |            |
| Ву:       | FOR SECRETARY OF STATE USE ONLY | 10:40 | Print or Type Name President  Title   | ·          |
|           |                                 | J     | Form 630 Rev. 1:  | 2/06       |