

Ву:

FOR SECRETARY OF STATE USE ONLY

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(cord)) is

subject to a penalty fee of \$25.00.			, , ,	, , , , , , , , , , , , , , , , , , , ,	* (101.0.2. / 1.2-1 /01(tOa))
1. Corporate ID No. 000142785	2. Name of Corporation Chocolate	e Indulgence, I	nc		
3. Street Address Principal Business Office 1845 Phenix Avenue			City	State	Zip
A Burden Bl		5. State of Incorporation	Cranston	_	02921
401-615-2772 Rhode Islan 6. Brief Description of the Character of Business Conducted in Rhode Island		nd			
Rental of Choco		Rhode Island			
7. NAMES AND ADDRESSES	S OF THE OFFICERS:	("X" BOX FOR ATT	ACHMENT) FILL IN SP.	ACES BEFORE USING	ATTACHMENTS
President Name Darren J. Jodoin			Vice President Name		
Street Address			Natatia Jodoin Street Address		
1845 Phenix Aven			1845 Phenix /	Avenue	
Cranston Secretary Name	State RI	^{z_{ip}} 02921	Cranston	State RI	^{zip} 02921
Natatia Jodoin			Treasurer Name Darren J. Jodoin		
Street Address			Street Address		
1845 Phenix Avenue			1845 Phenix Avenue		
Cranston	State RI	^{z_{ip}} 02921	Cranston	State RI	^{Zip} 02921
8. NAMES AND ADDRESSES Director Name	OF THE DIRECTORS	: ("X" BOX FOR AT	TACHMENT) [] FILL IN SI	 PACES BEFORE USING	ATTACHMENTS
None			Director Name		
Street Address			Street Address		
City	State	Las			
	June	Zip	City	State	Zip
Director Name		J	Director Name		
Street Address			Street Address		
City			britis /mares		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED	1	·	10. SHARES ISSUED ("2	N' BOX FOR ATTACHA	 MENT) □
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. 1,000 Authorized Shares			Number of Shares	Class/Series	Par Value
			1,000	Common	
			1,000	Common	.01
					ľ
This report must be executed of this report must be executed or	on behalf of the corpo	ration by an authorize	d representative. If the corpo	oration is in the hands o	of a receiver or trustee,
this report must be executed o	n ochan of the corpor	ation by the receiver (or trustee.		
			Under penalty of perjur	v. I declare and affirm tha	t I have examined this report
			including any accompa	nying schedules and stater	ments, and that all statemen
File Date	0-09		contained herein are to	1 Correct.	
1/1	16		Signature /	/	Date
Check No.			Darren J. Joo	doin	
∕ 1	1				

Print or Type Name President

Title