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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			
151045	CORPORATE PERFORMANCE PARTNERS, INC.			
3. Street Address Principal Business Office: 346 MIDDLE ROAD	City: EAST GREENWICH	State: RI	Zip: 02818	
4. Business Phone No.: 401-639-7705	5. State of Incorporation: RI			
6. Brief Description of the Character of Business Conducted in Rhode Island: BUSINESS CONSULTING – STRATEGY, MARKETING, SALES				

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

President Name	Street Address	City	State	Zip
LEONARD I. TINKOFF	346 MIDDLE ROAD	EAST GREENWICH	RI	02818

Vice President Name	Street Address	City	State	Zip

Secretary Name	Street Address	City	State	Zip

Treasurer Name	Street Address	City	State	Zip

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

Director Name	Street Address	City	State	Zip
LEONARD I. TINKOFF	346 MIDDLE ROAD	EAST GREENWICH	RI	02818

Director Name	Street Address	City	State	Zip

Director Name	Street Address	City	State	Zip

9. SHARES AUTHORIZED 1000

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

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.

ISSUED SHARES — THIS SECTION MUST BE COMPLETED

Number of Shares	Class Series	Par Value
1000	NONE	1¢

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.

Leonard I Tinkoff 2/22/09

Signature *Date*

LEONARD I. TINKOFF

Print or Type Name

PRESIDENT

Title

File Date 2-24-09

Check No. 167

By: MMC

FOR SECRETARY OF STATE USE ONLY

[redacted]

31389-14-351251

Form 630 Rev. 08/08