



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. 5222		2. Name of Corporation Crest Tile And Marble Co., Inc.		
3. Street Address Principal Business Office 1130 Lonsdale Ave.		City CENTRAL FALLS	State RI	Zip 02863
4. Business Phone No. 401 723 9774		5. State of Incorporation RI		
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 Robert Fortunati		Vice President Name Bernard Benoit		
Street Address 35 William St.		Street Address 247 W. Wrentham Rd.		
City LINCOLN	State RI	Zip 02865	City Cumberland	State RI
Secretary Name Robert Fortunati		Treasurer Name Bernard Benoit		
Street Address 35 William St.		Street Address 247 W. Wrentham Rd.		
City Lincoln	State RI	Zip 02865	City Cumberland	State RI
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS				
Director Name		Director Name		
Street Address		Street Address		
City	State	Zip	City	State
Director Name		Director Name		
Street Address		Street Address		
City	State	Zip	City	State
9. SHARES AUTHORIZED 200 Common no par value				
10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐				
ISSUED SHARES — THIS SECTION MUST BE COMPLETED				
Number of Shares	Class/Series	Par Value		
100	Common	no par value		
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.				

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.

FILED

MAR 17 2009

File Date _____
Check No. _____
By: _____
FOR SECRETARY OF STATE USE ONLY

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: Robert Fortunati
Date: 3-11-09
Print or Type Name: Robert Fortunati
Title: President