



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 02904-261
401.222.304

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. 5057		2. Name of Corporation E.A. Dance Studios of Providence, Inc.	
3. Street Address Principal Business Office 205 Weybosset Street		City Providence	State RI
		Zip 02903	
4. Business Phone No. 401-331-0915	5. State of Incorporation Rhode Island		
5. 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 Ernest D. Garcia			Vice President Name Ernest D. Garcia		
Street Address 205 Weybosset Street			Street Address 205 Weybosset Street		
City Providence	State RI	Zip 02903	City Providence	State RI	Zip 02903
Secretary Name Ann Digiovanni			Treasurer Name Ernest D. Garcia		
Street Address 205 Weybosset Street			Street Address 205 Weybosset Street		
City Providence	State RI	Zip 02903	City Providence	State RI	Zip 02903

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

Director Name Ernest D. Garcia			Director Name		
Street Address 205 Weybosset Street			Street Address		
City Providence	State RI	Zip 02903	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip

9. SHARES AUTHORIZED

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.

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

ISSUED SHARES -- THIS SECTION **MUST** BE COMPLETED

Number of Shares	Class/Series	Par Value
600	Common	No Par

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.

File Date **FILED**

Check No. **AUG 13 2009**

By: [Signature]

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.

Ernest D. Garcia 8/6/09
Signature Date

Ernest D. Garcia
Print or Type Name

President
Title