



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 159691		2. Name of Corporation PREMIER LEGENDS GROUP, INC.			
3. Street Address Principal Business Office 326 CARPENTER ST.		City PROVIDENCE		State RI	Zip 02909
4. Business Phone No. 401-273-4653		5. State of Incorporation RHODE ISLAND			
6. Brief Description of the Character of Business Conducted in Rhode Island CREATION OF PROGRAMS & PRODUCTS RELATED TO FINE ART & SCULPTURE					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name RICHARD J. MULLANEY			Vice President Name		
Street Address 14 WHITNEY CT.			Street Address		
City NARRAGANSETT	State RI	Zip 02882	City	State	Zip
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name RICHARD J. MULLANEY			Director Name		
Street Address 14 WHITNEY CT.			Street Address		
City NARRAGANSETT	State RI	Zip 02882	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED			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 8000	Class/Series COMMON NO PAR	Par Value .01

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

OCT 09 2009

By 900488

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 Date 10-9-09

RICHARD J. MULLANEY

Print or Type Name PRESIDENT/MANAGING DIRECTOR

Title

File Date
Check No. 87:8
By: 20090902
FOR SECRETARY OF STATE USE ONLY