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By 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

2010

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 1D No. 2. Name of Corporation GKS SALÉS INC. 129153 3. Street Address Principal Business Office 104 PLEASANT STREET N. KINGSTOWN RI 02852 4. Business Phone No 5. State of Incorporation 401-451-7637 RI 6. Brief Description of the Character of Business Conducted in Rhode Island TICKET SALES 7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) [] FILL IN SPACES BEFORE USING ATTACHMENTS President Name Vice President Name **GLENN SODERLUND** Street Address Street Address 104 PLEASANT STREET City State Z_{iD} N. KINGSTOWN RI 02852 Treasurer Name Secretary Name Street Address Street Address City State ZipCity State 8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) [FILL IN SPACES BEFORE USING ATTACHMENTS **GLENN SODERLUND** Street Address Street Address 104 PLEASANT STREET State City Zip City State Z_{40} N. KINGSTOWN 02852 RI Director Name Director Name Street Address Street Address State Z_{iD} City State Ztb9. SHARES AUTHORIZED 10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ISSUED SHARES - THIS SECTION MUST BE COMPLETED Number of Shares 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 NONE 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. 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 corregt Date GLENN SODERLUND Print or Type Name **PRESIDENT** Title Form 630 Rev. 08/08