

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	5.00.			<u> </u>			
1. Corporate ID No. 155591	2. Name of Corpo Provenance	2. Name of Corporation Provenance, Ltd.					
5. Street Address Principal Business Office 271 Post Road			City Westerly	State Ri	02891		
4. Business Phone No. 214-821-2226 214-325-6921 Rhode Island			tion				
- gonoral calce/art bro	haracter of Business Conduct kerage sales & invest	Tent/consultant			A ATTACHMENTS		
7. NAMES AND ADDI	RESSES OF THE OFFIC	CERS: ("X" BOX FOR	ATTACHMENT) [ FILL	IN SPACES BEFORE USIN	IG ATTACHMENTS		
President Name			Vice President Name Stuart M. Kent				
Stuart M. Kent			Street Address				
Street Address 3216 Lakenhealth Pl.			3216 Lakenhealth Pl.				
City Dallas	State TX	<i>Ζίρ</i> 75204	City Dallas	State TX	7520 <b>4</b>		
Secretary Name Stuart M. Kent			Treusurer Name Stuart M. Kent				
Street Address 3216 Lakenhealth Pl.			Street Address 3216 Lakenhealth PI.				
City Dallas	State TX	<sup>Zip</sup> 75204	City Dallas	State TX	75204		
8. NAMES AND ADD	RESSES OF THE DIRI	ECTORS: ("X" BOX FO		LL IN SPACES BEFORE U	SING ATTACHMENTS		
Director Name			Director Name				
Stuart M. Kent			Street Address				
Street Address			Street Address				
3216 Lakenhealth		70	City	State	Zip		
City	State	75204	- Cup				
Dallas			Director Name				
Director Name							
Street Address			Street Address				

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.

Number of Shares

5000

File Date FILED	
Check NoFEB_01_2010	
By: 3V 1) 25	
FOR SECRETARY OF STATE USE ONLY	]

State

State. Changes require an additional filing. See Section 9 of

This information is currently of record in the Office of the Secretary of

9. SHARES AUTHORIZED

instruction sheet.

Zip

Under penalty of perjury, I declare and affirm that including any accompanying schedules and statem contained herein are true and correct.	have examined this report, ents, and that all statements
Signature	Date
Stuart M. Kent	
Print or Type Name	
President	
Title	Form 630 Rev. 08/08

State

Class/Series

common

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

issued shares — this section  $\underline{\text{must}}$  be completed

Zip

Par Value

\$0.01