



**STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS**
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River St., 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

* 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. 100371
2. Name of Corporation AWARDS NEW ENGLAND, INC.
3. Street Address Principal Business Office 341-C George Washington Highway
City: Smithfield State: RI Zip: 02917
4. Business Phone No. 401-231-0070
5. State of Incorporation RHODE ISLAND
6. Brief Description of the Character of Business Conducted in Rhode Island
MANUFACTURE AND SALE OF TROPHIES AND SOUVENIR ITEMS.

7. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name Marlene Kubaska Street Address 24 Green Meadow Road City: Cumberland State: RI Zip: 02864	Vice President Name Street Address City: State: Zip:
Secretary Name John P. Kubaska Street Address 24 Green Meadow Road City: Cumberland State: RI Zip: 02864	Treasurer Name John P. Kubaska Street Address 24 Green Meadow Road City: Cumberland State: RI Zip:

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

Director Name Marlene Kubaska Street Address 24 Green Meadow Road City: Cumberland State: RI Zip: 02864	Director Name Street Address City: State: Zip:
Director Name Street Address City: State: Zip:	Director Name Street Address City: State: Zip:

9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)

AUTHORIZED SHARES	Class/Series	Par Value
1,000 COMM NO PAR VALUE		

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

ISSUED SHARES	Class/Series	Par Value
100	Common	No Par Value

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: 2-17-2010
Check No.: 5340
By: MNC
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: Marlene Kubaska Date: 2/15/10
Print or Type Name: Marlene Kubaska
Title: President