



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 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 ID No. 107901		2. Name of Corporation ROSENBLUTH INTERNATIONAL, INC.			
3. Street Address Principal Business Office 200 VESEY STREET			City NEW YORK	State NY	Zip 10285
4. Business Phone No. 212-640-6439		5. State of Incorporation PA			
6. Brief Description of the Character of Business Conducted in Rhode Island					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name KENNETH I. CHENAULT			Vice President Name RONALD C. STOVALL		
Street Address 200 VESEY ST.			Street Address 200 VESEY ST.		
City NEW YORK	State NY	Zip 10285	City NEW YORK	State NY	Zip 10285
Secretary Name CAROL V. SCHWARTZ			Treasurer Name DAVID L. YOWAN		
Street Address 200 VESEY ST.			Street Address 200 VESEY ST.		
City NEW YORK	State NY	Zip 10285	City NEW YORK	State NY	Zip 10285
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name KENNETH I. CHENAULT			Director Name		
Street Address 200 VESEY ST.			Street Address		
City NEW YORK	State NY	Zip 10285	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) <input type="checkbox"/>		
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 <b>MUST</b> BE COMPLETED		
			Number of Shares 0	Class/Series	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.

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 Carol V. Schwartz Date 2/16/10  
CAROL V. SCHWARTZ  
Print or Type Name  
SECRETARY  
Title

File Date	<b>FILED</b>
Check No.	<b>FEB 19 2010</b>
By:	<u>8262074</u>
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