

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 \$75.00

subject to a penalty fee by \$2				•	,	
1. Corporate ID No. 73069	2. Name of Corpo				<del></del>	
1	FIRENZA	JEWELERS, INC				
3. Street Address Principal Business Office			City	State	Zip	
LINCOLN MALL, D-4 WASHINGTON HGWY		5. State of Incorporation	LINCOLN	RI	02865	
401-334-1611 RHODE ISLAN			<b>N</b> T <b>1</b> ">		<u>-</u>	
6. Brief Description of the Character of Business Conducted in Rhode Island			ND			
THE RETAIL AN	ID SERVICE	OF TEWELDY				
7. NAMES AND ADDRES	SSES OF THE OFFIC	ERS: ("X" ROX FOR ATT	ACHMENT) [ FILL IN CD.	CEC BEECOND HOUSE		
President Name	7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTA President Name			CES BEFORE USING AT	TACHMENTS	
ANTOINE TANNO	ANTOINE TANNOUS			Vice President Name ANTOINE TANNOUS		
Street Address			Street Address			
3 WARING CIRCLE			3 WARING CIRCLE			
City	State	Zip	City	State	Zip	
WORCESTER	MA	01609	WORCESTER	MA	01609	
Secretary Name		***************************************	Treasurer Name			
ANTOINE TANNOUS			ANTOINE TANNOUS			
Street Address			Street Address			
3 WARING CIRCLE			3 WARING CIRCLE			
MODGEGMED	State	Zip	City	State	Zip	
WORCESTER	MA	01609	WORCESTER	MA	01609	
Director Name	SES OF THE DIREC	TORS: ("X" BOX FOR AT	TACHMENT) TILL IN SI	PAČES BEFORE USING A	ATTACHMENTS	
ANTOINE TANNOUS			Director Name			
Street Address			GEORGE M. THOMAS			
3 WARING CIRCLE			Street Address			
City			2 BLACKTHORN DRIVE			
WORCESTER	MA	2ip 01609	City NOD CHOMED	State	Zip	
Director Name			WORCESTER	MA	01609	
			Director Name			
Street Address	<del></del>		Street Address	<del></del>	<u> </u>	
			• Sireer Address	•		
City	State	Zip	City	State	Zip	
			•		\ \frac{1}{2}	
9. SHARES AUTHORIZE	:D		10. SHARES ISSUED (")	(" BOX FOR ATTACHME	ENT) [□	
			ISSUED SHARES — THIS SECTION	ON MUST BE COMPLETED	, L	
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.			Number of Shares	Class/Series	Par Value	
					-	
			10	O COMMON/VOTING	NO PA	
		····	<u></u>			
This report must be exec	uted on behalf of the	corporation by an authoriz	ed representative. If the corpo	oration is in the hands of	a receiver or trustee	
this report must be execu	ited on behalf of the	corporation by the receiver	or trustee.		,	
			Under penalty of perim	ry, I declare and affirm that I	have avaning debi-	
			including any accompa	nying schedules and stateme	nave exammed mis repents, and that all statem	
FILE	D		contained herein are tra	ie and correct.	and the state of t	
File Date			axus	2.23-1	0	
Check No. FEB 25 2	010		Signature		Date	
By:  FOR SECRETARY OF STATE USE ONLY			ANTOINE TAN	INOUS	- 4	
			Print or Type Name	111003		
			PRESIDENT			
			Title		Form 620 D 00/00	
					Form 630 Rev. 08/08	