RI SOS Filing Number: 201060848470 Date: 03/24/2010 4:00 PM

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	2. Name of Corporation		
145526	Scandinavian Holdings, Inc.		
3. Street Address Principal Business Office	City	State	Zip
38 BELLEVUE AVENUE, SUITE H	NEWPORT	RI	02840
4. Business Phone No.	5. State of Incorporation		
401-841-8480	RHODE ISLAND		

6. Brief Description of the Character of Business Conducted in Rhode Island
ACQUISITION AND OWNERSHIP OF STOCK IN COMPANIES

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

President Name	Vice President Name
Alfred van Wincoop	
Street Address	Street Address
38 Bellevue Avenue, Suite H	
City / State / Zip	City / State / Zip
Newport / RI / 02840	
Secretary Name	Treasurer Name
Steven M. McInnis	Alred van Wincoop
Street Address	Street Address
38 Bellevue Avenue, Suite H	38 Bellevue Avenue, Suite H
City / State / Zip	City / State / Zip
Newport / RI / 02840	Newport / RI / 02840

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

Director Name	Director Name
Alfred van Wincoop	
Street Address	Street Address
38 Bellevue Avenue, Suite H	
City / State / Zip	City / State / Zip
Newport / RI / 02840	
Director Name	Director Name
Street Address	Street Address
City / State / Zip	City / State / Zip

9. SHARES AUTHORIZED

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.

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

ISSUED SHARES — THIS SECTION MUST BE COMPLETED

Number of Shares	Class/Series	Par Value
10,000	Common	No Par
1,250,000	Cl. A Non-Vote	Pref $1 Par
1,200,000	Cl. B Non-Vote	Pref $1 Par

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.

[redacted] [redacted]

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.

Steven M. McInnis 3/19/10
Signature *Date*

Steven M. McInnis
Print or Type Name

Secretary
Title

[redacted]

FILED
File Date MAR 24 2010
Check No. 10797
By: By

FOR SECRETARY OF STATE USE ONLY
47131-28-498552

Form 630 Rev. 08/08