



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Molis, 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. 134488		2. Name of Corporation Sail Shadz, Inc.			
3. Street Address Principal Business Office 27 Brook Street			City Jamestown	State Rhode Island	Zip 02835
4. Business Phone No. 401-261-0876		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island The offering of goods and services in the RI market related in any way to dance.					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Christopher Pike			Vice President Name Christopher Pike		
Street Address 27 Brook Street			Street Address 27 Brook Street		
City Jamestown	State Rhode Island	Zip 02835	City Jamestown	State Rhode Island	Zip 02835
Secretary Name Christopher Pike			Treasurer Name Christopher Pike		
Street Address 27 Brook Street			Street Address 27 Brook Street		
City Jamestown	State Rhode Island	Zip 02835	City Jamestown	State Rhode Island	Zip 02835
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Christopher Pike			Director Name		
Street Address 27 Brook Street			Street Address		
City Jamestown	State Rhode Island	Zip 02835	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 MUST BE COMPLETED		
			Number of Shares	Class/Series	Par Value
			100	COMMON	NONE

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 **FILED**
Check No. **AUG 11 2010**
By: **5659**
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
Date **8/9/10**
Print or Type Name **Christopher Pike**
Title **President**