

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 2011

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(cc*d)) is subject to a panelty file of \$25.00

subject to a penalty fee of \$25.00.				·		
1. Corporate ID No. 106833	2. Name of Corpor THE GALDO	2. Name of Corporation THE GALDONIK GROUP, INC.				
3. Street Address Principal Business Office 32 Blackmore Street			City East Greenwich	State RI	<i>Zip</i> 02818	
4. Business Phone No. 12 5. State of Incorporation 401-885-4058 FAX: 401-885-4209 Rhode Island						
6. Brief Description of the Characte To create, market & Provi	er of Business Conducted de educational, inf	d in Rhode Island formational & motivational	communication & training	programs		
7. NAMES AND ADDRESSI President Name Ruth C. Galdonik	ES OF THE OFFICI	ERS: ("X" BOX FOR ATT	ACHMENT) FILL IN SI	PACES BEFORE USING ATT	ACHMENTS	
Street Address 32 Blackmore Street			Street Address			
City East Greenwich	State RI	<i>2i</i> р 02818	City	State	Zip	
Secretary Name Ruth C. Galdonik			Treassurer Name Ruth C. Galdonik			
Street Address 32 Blackmore Street			Street Address 32 Blackmore Street			
City East Greenwich	State Ri	^{Zip} 02818	City East Greenwich	State RI	<i>Zip</i> 02818	
8. NAMES AND ADDRESSE Director Name	ES OF THE DIRECT	TORS: ("X" BOX FOR AT	TACHMENT) FILL IN : Director Name	SPACES BEFORE USING AT		
Street Address			Street Address			
City	State	Zip	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) ISSUED SHARES — THIS SECTION MUST BE COMPLETED			
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	
			800	Class A Common	No Par	
			7,200	Class B Common	No Par	
This report must be execute this report must be executed	ed on behalf of the of	corporation by an authoriz orporation by the receiver	ed representative. If the cor or trustee.	poration is in the hands of	a receiver or trustee,	
		•				
	LED	_	including any accom	jury, I declare and affirm that I panying schedules and stateme	have examined this rep nts, and that all statem	
File Date FEB	_ 1 1 2011	_	contained herein are	true and correct.	2/1/11	
Check NoBy	mne	_	Signature Ruth C. Galdo	/ onik	Date	
Ву:	199		Print or Type Name			
FOR SECRETARY OF S	TATE USE ONLY		President			
<u> </u>			Title			