

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

Filling Period: January 1 - March 1 • Filling 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).

1. Corporate ID No. 00022703	STERLIN	Kame of Corporation ERLING JEWELERS INC.				
3. Street Address Principal Business Office 375 GHENT ROAD			City AKRON	State OH	Ζφ 44333	
6. Business Phone No. (330) 665-6582 5. State of Incorporation DELAWARE					44333	
 Brief Description of the INSURANCE AGE 	e Character of Business Condi ENCY	acted in Rhode Island				
MARK S. LIGHT	DRESSES OF THE OFF	ICERS: ("X" BOX FOR ATT	ACHMENT) FILL 1 Vice President Name SIMON L. CASH		G ATTACHMENTS	
Street Address 375 GHENT ROAD			Street Address 375 GHENT ROAD			
City AKRON Secretary Name	State OH	^{Zip} 44333	City AKRON	State OH	<i>хір</i> 44333	
BEORGE S. FRANKOVICH reel Address			Treasurer Name ROBERT D. TRABUCCO			
375 GHENT ROAD			Street Address 375 GHENT ROAD			
AKRON	State OH	^{Zip} 44333	City AKRON	State OH	<i>хір</i> 44333	
irector Name IICHAEL W. BAI reet Address	RNES	ECTORS: ("X" BOX FOR AT	TACHMENT) FILL Director Name MARK S. LIGHT	IN SPACES BEFORE USI	NG ATTACHMENTS	
75 GHENT ROAD			Street Address 375 GHENT ROAD			
KRON irector Name	State OH	2ip 44333	City AKRON	State OH	<i>гір</i> 44333	
ONAL W. RISTA	<u> </u>		Director Name ROBERT D. TRA	BUCCO		
75 GHENT ROAD			Street Address 375 GHENT ROAD			
KRON SHARES AUTHOR	State OH	^{Zip} 44333	AKRON	State OH	<i>Хір</i> 44333	
			10. SHARES ISSUE: ISSUED SHARES — THIS S	D ("X" BOX FOR ATTAC SECTION MUST BE COMPLETED	CHMENT)	
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	
			1000	CNP	0.00	

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File Date	
Check No.	FEB 28 2011
By:	4992618
FOR SECI	RETARY 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 the rule and correct. Signature
GEORGES. FRANKOVICH
Print or Type Name
VICE PRESIDENT & SECRETARY