



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 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(c), 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)(4)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 123506		2. Name of Corporation BAMBU TATTOO ART STUDIO, INC.			
3. Street Address Principal Business Office 71 RICHMOND STREET			City PROVIDENCE	State RI	Zip 02903
4. Business Phone No. (401) 274-5055		5. State of Incorporation RHODE ISLAND			
6. Brief Description of the Character of Business Conducted in Rhode Island TO ENGAGE IN THE BUSINESS OF OPERATING A TATTOO AND ART STUDIO					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name JOEL MEJIAS			Vice President Name TRACIE MEJIAS		
Street Address 57 DESMOND AVENUE			Street Address 57 DESMOND AVENUE		
City SOMERSET	State MA	Zip 02726	City SOMERSET	State MA	Zip 02726
Secretary Name GEORGE DIETZ			Treasurer Name TRACIE MEJIAS		
Street Address 284 MONTGOMERY AVENUE			Street Address 57 DESMOND AVENUE		
City CRANSTON	State RI	Zip 02905	City SOMERSET	State MA	Zip 02726
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name JOEL MEJIAS			Director Name TRACIE MEJIAS		
Street Address SAME AS ABOVE			Street Address SAME AS ABOVE		
City	State	Zip	City	State	Zip
Director Name GEORGE DIETZ			Director Name		
Street Address SAME AS ABOVE			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 300	Class/Series COMMON	Par Value NOR 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.

FILED

MAR 04 2011

File Date _____
Check No. _____
By: JMD
29-12 9233
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: [Signature] Date: 2-27-11
JOEL MEJIAS
Print or Type Name
PRESIDENT
Title