



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Matthew A. Brown, Secretary of State
Corporations Division
148 W. River
Providence, RI 02904-26
401.222.3000

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2011

Filing Period: January 1 - March 1 • Filing Fee: \$50.00*

* 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. 33655		2. Name of Corporation ARROW FLORIST, INC.		
3. Street Address Principal Business Office 757 Park Avenue			City Cranston	State RI
4. Business Phone No. 401-785-1900		5. State of Incorporation RHODE ISLAND		
6. Brief Description of the Character of Business Conducted in Rhode Island Wholesale foilage to sell to the general public.				
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
President Name Donald B. Pagliarini			Vice President Name Donald B. Pagliarini	
Street Address 757 Park Avenue			Street Address 757 Park Avenue	
City Cranston	State RI	Zip 02910	City Cranston	State RI
Secretary Name Donald B. Pagliarini			Treasurer Name Donald B. Pagliarini	
Street Address 757 Park Avenue			Street Address 757 Park Avenue	
City Cranston	State RI	Zip 02910	City Cranston	State RI
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
Director Name Donald B. Pagliarini			Director Name None	
Street Address 757 Park Avenue			Street Address	
City Cranston	State RI	Zip 02910	City	State
Director Name None			Director Name None	
Street Address			Street Address	
City	State	Zip	City	State
9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>				
AUTHORIZED SHARES				
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series
600	Common	No Par Value	100	Common
10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>				
ISSUED SHARES				
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series
600	Common	No Par Value	100	Common

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.

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.

Donald B. Pagliarini
Signature

3-14-11
Date

Donald B. Pagliarini

Print or Type Name

President

Title

File Date	FILED
Check No.	MAR 17 2011
By: BY	13397
FOR SECRETARY OF STATE USE ONLY	