RI SOS Filing Number: 201176811410 Date: 03/22/2011 4:00 PM

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

ing 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.	2. Name of Corporation			
4097	Cheryl Enterprises, Inc.			
3. Street Address Principal Business Office		City	State	Zip
21 Manning Street		North Providence	RI	02911
4. Business Phone No.	5. State of Incorporation			
	Rhode Island			

6. Brief Description of the Character of Business Conducted in Rhode Island
Real estate

7. NAMES AND ADDRESSES OF THE OFFICERS: *("X" BOX FOR ATTACHMENT)* ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name	Street Address	City	State	Zip
Antonetta Brennan	21 Manning Street	North Providence	RI	02911

Vice President Name	Street Address	City	State	Zip
None				

Secretary Name	Street Address	City	State	Zip
Cheryl A. Grossi	46 Pine Hill Avenue	Johnston	RI	02919

Treasurer Name	Street Address	City	State	Zip
Antonetta Brennan	21 Manning Street	North Providence	RI	02911

8. NAMES AND ADDRESSES OF THE DIRECTORS: *("X" BOX FOR ATTACHMENT)* ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name	Street Address	City	State	Zip
Joseph E. Brennan, Sr.	21 Manning Street	North Providence	RI	02911

Director Name	Street Address	City	State	Zip
Antonetta Brennan	21 Manning Street	North Providence	RI	02911

Director Name	Street Address	City	State	Zip

9. SHARES AUTHORIZED

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.

10. SHARES ISSUED *("X" BOX FOR ATTACHMENT)* ☐

ISSUED SHARES — THIS SECTION MUST BE COMPLETED

Number of Shares	Class/Series	Par Value
100	Common	No Par

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SECRETARY OF STATE
CORPORATIONS DIVISION

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.

[redacted]

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.

Antonetta Brennan 3-19-2011
Signature *Date*

Antonetta Brennan ANTONETTA BRENNAN
Print or Type Name

President PRESIDENT
Title

[redacted]

File Date _____
Check No. _____
By: _____

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By 1406 25

Form 630 Rev. 08/08