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(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. 129234	*2. Name of Corporation* Country Pewter, Inc.

3. Street Address Principal Business Office	*City*	*State*	*Zip*
401 Arnold Avenue	Coventry	RI	02816

4. Business Phone No.	*5. State of Incorporation*
(401) 822-2120	RI

6. Brief Description of the Character of Business Conducted in Rhode Island
Manufacture, produce and/or finish pewter and/or other metala products

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

President Name	*Vice President Name*
Stanley Scorobogaty	Paula Scorobogaty
Street Address 61 Idaho Street	*Street Address* Same
City Coventry / *State* RI / *Zip* 02816	*City* / *State* / *Zip*
Secretary Name Paula Scorobogaty	*Treasurer Name* Stanley Scorobogaty
Street Address Same as above	*Street Address* Same as above
City / *State* / *Zip*	*City* / *State* / *Zip*

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

Director Name None	*Director Name*
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

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*
1000	Common	$1.00 par value
200	Common	$1.00 par value

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]

FILED
File Date MAR 2 8 2011
Check No.
By. BY 241

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60719-28-610772

[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.

Signature *Date* 3/18/11

Stanley Scorobogaty
Print or Type Name

President
Title

[redacted]