RI SOS Filing Number: 201177843960 Date: 04/05/2011 4:00 PM

State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Office of the Secretary of State
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. 7-1.2-1502) is subject to a penalty fee of $25.00.*

1. Corporate I.D. No.	2. Name of Corporation
144928	MINIFOLD, INC.

3. Street Address Principal Business Office	City	State	Zip
9 Warren Avenue	East Prov.	RI	02914

4. Business Phone No.	5. State of Incorporation
434-4140	Rhode Island

6. Brief Description of the Character of Business Conducted in Rhode Island
Finishing and binding for printed material

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

President Name	Street Address	City	State	Zip
Elaine M. Brissart	9 Warren Avenue	East Prov.	RI	02914

Vice President Name	Street Address	City	State	Zip
Elaine M. Brissart	9 Warren Avenue	East Prov.	RI	02914

Secretary Name	Street Address	City	State	Zip
Elaine M. Brissart	9 Warren Avenue	East Prov.	RI	02914

Treasurer Name	Street Address	City	State	Zip
Elaine M. Brissart	9 Warren Avenue	East Prov.	RI	02914

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

Director Name	Street Address	City	State	Zip
Elaine M. Brissart	9 Warren Avenue	East Prov.	RI	02914

Director Name	Street Address	City	State	Zip

Director Name	Street Address	City	State	Zip

2011 APR -5 AM 9:59
CORPORATIONS DIV
SECRETARY OF STATE

9. SHARES AUTHORIZED
100 No Par Value Common

10. SHARES ISSUED *("X" BOX FOR ATTACHMENT)* ☐
ISSUED SHARES — THIS SECTION MUST BE COMPLETED

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
50	Common	No 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 APR 05 2011
Check No. By mnc
By: 61063-3-615840 3073

[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.

Elaine Brissart 4-1-11
Signature *Date*

Elaine M. Brissart
Print or Type Name
President