



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  
101.222.3040

# PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2006

**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)(d)) is subject to a penalty fee of \$25.00.

|                                                                                                                                                            |                       |                                                            |                                                                                                             |                        |                           |
|------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|------------------------|---------------------------|
| 1. Corporate ID No.<br>64468                                                                                                                               |                       | 2. Name of Corporation<br>Certified Candy Management, Inc. |                                                                                                             |                        |                           |
| 3. Street Address Principal Business Office<br>4 Eddie Dowling Highway                                                                                     |                       | City<br>North Smithfield                                   |                                                                                                             | State<br>Rhode Island  | Zip<br>02896              |
| 4. Business Phone No.<br>401-769-1166                                                                                                                      |                       | 5. State of Incorporation<br>Rhode Island                  |                                                                                                             |                        |                           |
| 6. Brief Description of the Character of Business Conducted in Rhode Island<br>candy sales                                                                 |                       |                                                            |                                                                                                             |                        |                           |
| 7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS                          |                       |                                                            |                                                                                                             |                        |                           |
| President Name<br>Elissa A. Pearl                                                                                                                          |                       |                                                            | Vice President Name                                                                                         |                        |                           |
| Street Address<br>4 Eddie Dowling Highway                                                                                                                  |                       |                                                            | Street Address                                                                                              |                        |                           |
| City<br>North Smithfield                                                                                                                                   | State<br>Rhode Island | Zip<br>02896                                               | City                                                                                                        | State                  | Zip                       |
| Secretary Name<br>Elissa A. Pearl                                                                                                                          |                       |                                                            | Treasurer Name<br>Elissa A. Pearl                                                                           |                        |                           |
| Street Address<br>4 Eddie Dowling Highway                                                                                                                  |                       |                                                            | Street Address<br>4 Eddie Dowling Highway                                                                   |                        |                           |
| City<br>North Smithfield                                                                                                                                   | State<br>Rhode Island | Zip<br>02896                                               | City<br>North Smithfield                                                                                    | State<br>Rhode Island  | Zip<br>02896              |
| 8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS                         |                       |                                                            |                                                                                                             |                        |                           |
| Director Name<br>Elissa A. Pearl                                                                                                                           |                       |                                                            | Director Name                                                                                               |                        |                           |
| Street Address<br>4 Eddie Dowling Highway                                                                                                                  |                       |                                                            | Street Address                                                                                              |                        |                           |
| City<br>North Smithfield                                                                                                                                   | State<br>Rhode Island | Zip<br>02896                                               | City                                                                                                        | State                  | Zip                       |
| Director Name                                                                                                                                              |                       |                                                            | Director Name                                                                                               |                        |                           |
| Street Address                                                                                                                                             |                       |                                                            | Street Address                                                                                              |                        |                           |
| City                                                                                                                                                       | State                 | Zip                                                        | City                                                                                                        | State                  | Zip                       |
| 9. SHARES AUTHORIZED                                                                                                                                       |                       |                                                            | 10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS |                        |                           |
| 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 <u>MUST</u> BE COMPLETED                                                       |                        |                           |
|                                                                                                                                                            |                       |                                                            | Number of Shares<br>200                                                                                     | Class/Series<br>Common | Par Value<br>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.

|                                 |                      |
|---------------------------------|----------------------|
| File Date                       | <b>FILED</b>         |
| Check No.                       | <b>OCT 26 2011</b>   |
| By:                             | <b>By: 06/155232</b> |
| 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: Elissa A. Pearl Date: 10/20/11  
Print or Type Name: Elissa A. Pearl  
Title: President