



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 2012

**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.<br><b>94828</b>                                                                                                                        |                      | 2. Name of Corporation<br><b>A. GAZERRO &amp; ASSOCIATES, INC.</b> |                                                                     |                               |                            |
| 3. Street Address Principal Business Office<br><b>1343 Hartford Avenue</b>                                                                                 |                      |                                                                    | City<br><b>Johnston</b>                                             | State<br><b>RI</b>            | Zip<br><b>02919-0000</b>   |
| 4. Business Phone No.<br><b>(401) 751-8850</b>                                                                                                             |                      | 5. State of Incorporation<br><b>RI</b>                             |                                                                     |                               |                            |
| 6. Brief Description of the Character of Business Conducted in Rhode Island<br><b>manufacturers' representative</b>                                        |                      |                                                                    |                                                                     |                               |                            |
| 7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS                          |                      |                                                                    |                                                                     |                               |                            |
| President Name<br><b>Andrew Gazerro, Jr.</b>                                                                                                               |                      |                                                                    | Vice President Name<br><b>Andrew Gazerro, Jr.</b>                   |                               |                            |
| Street Address<br><b>25 Thomas Lane</b>                                                                                                                    |                      |                                                                    | Street Address<br><b>25 Thomas Lane</b>                             |                               |                            |
| City<br><b>Cranston</b>                                                                                                                                    | State<br><b>RI</b>   | Zip<br><b>02921-</b>                                               | City<br><b>Cranston</b>                                             | State<br><b>RI</b>            | Zip<br><b>02921-</b>       |
| Secretary Name<br><b>Dolores A. Gazerro</b>                                                                                                                |                      |                                                                    | Treasurer Name<br><b>Dolores A. Gazerro</b>                         |                               |                            |
| Street Address<br><b>25 Thomas Lane</b>                                                                                                                    |                      |                                                                    | Street Address<br><b>25 Thomas Lane</b>                             |                               |                            |
| City<br><b>Cranston</b>                                                                                                                                    | State<br><b>RI</b>   | Zip<br><b>02921-</b>                                               | City<br><b>Cranston</b>                                             | State<br><b>RI</b>            | Zip<br><b>02921-</b>       |
| 8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS                         |                      |                                                                    |                                                                     |                               |                            |
| Director Name<br><b>Andrew Gazerro, Jr.</b>                                                                                                                |                      |                                                                    | Director Name<br><b>Dolores A. Gazerro</b>                          |                               |                            |
| Street Address<br><b>25 Thomas Lane</b>                                                                                                                    |                      |                                                                    | Street Address<br><b>25 Thomas Lane</b>                             |                               |                            |
| City<br><b>Cranston</b>                                                                                                                                    | State<br><b>RI</b>   | Zip<br><b>02921-</b>                                               | City<br><b>Cranston</b>                                             | State<br><b>RI</b>            | Zip<br><b>02921-</b>       |
| Director Name<br><b>none</b>                                                                                                                               |                      |                                                                    | Director Name<br><b>none</b>                                        |                               |                            |
| Street Address<br><b>none</b>                                                                                                                              |                      |                                                                    | Street Address<br><b>none</b>                                       |                               |                            |
| City<br><b>none</b>                                                                                                                                        | State<br><b>none</b> | Zip<br><b>none</b>                                                 | City<br><b>none</b>                                                 | State<br><b>none</b>          | Zip<br><b>none</b>         |
| 9. SHARES AUTHORIZED                                                                                                                                       |                      |                                                                    | 10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> |                               |                            |
| 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><b>200</b>                                      | Class/Series<br><b>Common</b> | Par Value<br><b>No Par</b> |
|                                                                                                                                                            |                      |                                                                    |                                                                     |                               |                            |

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.

**FILED**

|                                 |                    |
|---------------------------------|--------------------|
| File Date                       | <b>DEC 19 2011</b> |
| Check No.                       | <b>9V 7436</b>     |
| By:                             |                    |
| 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.

*Andrew Gazerro, Jr.* 12-14-11 01/02/2012  
Signature Date

**Andrew Gazerro, Jr.**

Print or Type Name

**President**

Title