



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 2001

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. 000047553		2. Name of Corporation Park Ave Travel, Ltd.		
3. Street Address Principal Business Office 2431 East Main Rd		City Portsmouth	State RI	Zip 02871
4. Business Phone No. 401-683-2590		5. State of Incorporation Rhode Island		
6. Brief Description of the Character of Business Conducted in Rhode Island Travel Agency				
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
President Name Nancy E. Raposa		Vice President Name Nancy U. Sundin		
Street Address 2431 East Main Rd		Street Address 2431 East Main Rd		
City Portsmouth	State RI	Zip 02871	City Portsmouth	State RI
Secretary Name Joseph Raposa Jr.		Treasurer Name Joseph Raposa Jr.		
Street Address 2431 East Main Rd		Street Address 2431 East Main Rd		
City Portsmouth	State RI	Zip 02871	City Portsmouth	State RI
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
Director Name Nancy E. Raposa		Director Name Nancy U. Sundin		
Street Address 2431 East Main Rd		Street Address 2431 East Main Rd		
City Portsmouth	State RI	Zip 02871	City Portsmouth	State RI
Director Name Joseph Raposa Jr.		Director Name		
Street Address 2431 East Main Rd		Street Address		
City Portsmouth	State RI	Zip 02871	City	State
9. SHARES AUTHORIZED				
10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>				
ISSUED SHARES - THIS SECTION <u>MUST</u> 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 600	Class/Series CNP	Par Value 0.0000

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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.

FILED

DEC 30 2011

By [Signature]
159709

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.

Nancy E. Raposa 12-29-11
Signature Date

Nancy E. Raposa
Print or Type Name

President
Title

File Date _____
Check No. _____
By _____
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