



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. 160749		2. Name of Corporation Stars Oil Co, III			
3. Street Address Principal Business Office 82 Lydia Street			City Providence	State RI	Zip 02908
4. Business Phone No. (401) 272-1241		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island Importing/exporting brokerage and sales					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Fareed G. Makhlof			Vice President Name Fareed G. Makhlof		
Street Address 82 Lydia Street			Street Address 82 Lydia Street		
City Providence	State RI	Zip 02908	City Providence	State RI	Zip 02908
Secretary Name Fareed G. Makhlof			Treasurer Name Fareed G. Makhlof		
Street Address 82 Lydia Street			Street Address 82 Lydia Street		
City Providence	State RI	Zip 02908	City Providence	State RI	Zip 02908
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name			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					
10. SHARES ISSUED: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
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		THIS SECTION MUST BE COMPLETED	
		0			

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

JAN 30 2012

By MNC
CA# 2962

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: Fareed Makhlof Date: 01/25/12

Fareed G. Makhlof
Print or Type Name
President
Title

