RI SOS Filing Number: 201288892990 Date: 02/01/2012 4:00 PM

WITH 50.00 CHECK TO

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. 41942	2. Name of Corporation ALCAN JEWELRY SUPPLY CORP.				
3. Street Address Principal Business Office 282 ADELAIDE AVENUE			City PROVIDENCE	State RI	Zip 02907
4. Business Phone No. 401-461-4160	5. State of Incorporation RHODE ISLAND				
6. Brief Description of the Character of Business Conducted in Rhode Island JEWELRY SUPPLIES					

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

President Name SUSAN A. SCUNGIO			Vice President Name SHIRLEY KIRKLAND		
Street Address 10 EVERBLOOM DRIVE			Street Address 35 MAIN AVENUE		
City CRANSTON	State RI	Zip 02920	City WARWICK	State RI	Zip 02886
Secretary Name SHIRLEY KIRKLAND			Treasurer Name SUSAN SCUNGIO		
Street Address			Street Address		
City	State	Zip	City	State	Zip

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

Director Name SHIRLEY KIRKLAND			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name SUSAN SCUNGIO			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip

9. SHARES AUTHORIZED

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.

10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐

ISSUED SHARES — THIS SECTION MUST BE COMPLETED

Number of Shares	Class/Series	Par Value
100	COMMON A	NO/PAR
THIS SECTION MUST BE COMPLETED		

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]

[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.

X Susan A. Scungio 1-30-12

Signature *Date*

SUSAN A. SCUNGIO
Print or Type Name

PRESIDENT
Title

[redacted]

FILED

File Date _____

Check No. FEB 01 2012

By: BY 11470

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72720-10-722633

Form 630 Rev. 08/08