



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 02904-2611
401.222.3041

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. 8755		2. Name of Corporation Tanya Creations, Inc.		
3. Street Address Principal Business Office 360 Narragansett Park Drive			City East Providence	State RI
			Zip 02916	
4. Business Phone No.		5. State of Incorporation		
6. Brief Description of the Character of Business Conducted in Rhode Island Jewelry				
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
President Name Peter Wallick			Vice President Name Peter Wallick	
Street Address 4 Jones Circle			Street Address 4 Jones Circle	
City Barrington	State RI	Zip	City Barrington	State RI
Secretary Name Peter Wallick			Treasurer Name Peter Wallick	
Street Address 4 Jones Circle			Street Address 4 Jones Circle	
City Barrington	State RI	Zip	City Barrington	State RI
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
Director Name Peter Wallick			Director Name Peter Wallick	
Street Address 4 Jones Circle			Street Address 4 Jones Circle	
City Barrington	State RI	Zip	City Barrington	State RI
Director Name			Director Name	
Street Address			Street Address	
City	State	Zip	City	State
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 MUST BE COMPLETED	
			Number of Shares 1,000	Class/Series Common
				Par Value No Par

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 **FEB 23 2012**

Check No. **52010**

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.

Peter Wallick

Signature **PETER WALLICK** Date _____

Print or Type Name **PRESIDENT**

Title _____