



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. <b>12957</b>		2. Name of Corporation <b>UNCLE MATTY'S TROPICAL GARDENS, INC.</b>	
3. Street Address Principal Business Office <b>62 Taunton Avenue</b>			City <b>East Providence</b>
		State <b>RI</b>	Zip <b>02914</b>
4. Business Phone No. <b>(401) 434-2235</b>		5. State of Incorporation <b>RHODE ISLAND</b>	
6. Brief Description of the Character of Business Conducted in Rhode Island <b>Sale of Plants</b>			
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name <b>MARTIN R. SIRAVO</b>		Vice President Name <b>MARTIN R. SIRAVO</b>	
Street Address <b>P.O. Box 451</b>		Street Address <b>P.O. Box 451</b>	
City <b>NEWPORT</b>	State <b>RI</b>	Zip <b>02840</b>	City <b>NEWPORT</b>
Secretary Name <b>MARTIN R. SIRAVO</b>	Treasurer Name <b>MARTIN R. SIRAVO</b>		Zip <b>02840</b>
Street Address <b>P.O. Box 451</b>		Street Address <b>P.O. Box 451</b>	
City <b>NEWPORT</b>	State <b>RI</b>	Zip <b>02840</b>	City <b>NEWPORT</b>
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
Director Name <b>MARTIN R. SIRAVO</b>		Director Name	
Street Address <b>P.O. Box 451</b>		Street Address	
City <b>NEWPORT</b>	State <b>RI</b>	Zip <b>02840</b>	City
Director Name	Director Name		Zip
Street Address		Street Address	
City	State	Zip	City
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 <b>500</b>	Class/Series <b>COMMON</b>
		Par Value <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 **FEB 28 2012**

Check No. **164 746**

By: **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.

**Martin R. Siravo** 2/15/12

Signature Date

**MARTIN R. SIRAVO**

Print or Type Name

**President**

Title