



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. 17726		2. Name of Corporation LANZI FURS LTD INC	
3. Street Address Principal Business Office 1854 ATWOOD AVE		City JOHNSTON	State R. I.
4. Business Phone No. 401 231 9174		5. State of Incorporation R. I.	
6. Brief Description of the Character of Business Conducted in Rhode Island			
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name GUIDO RAPONE JR.		Vice President Name ANGELINA LANZI	
Street Address 1854 ATWOOD AVE		Street Address 1854 ATWOOD AVE	
City JOHNSTON	State R. I.	City JOHNSTON	State R. I.
Zip 02919		Zip 02919	
Secretary Name EDITH RAPONE		Treasurer Name EDITH RAPONE	
Street Address 1854 ATWOOD AVE		Street Address 1854 ATWOOD AVE	
City JOHNSTON	State R. I.	City JOHNSTON	State R. I.
Zip 02919		Zip 02919	
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	City	State
Zip		Zip	
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
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 600	Class/Series COMMON
			Par Value NONE

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 27 2012
Check No.	16039
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.

Signature Guido Rapone Jr. Date 2/25/12
Print or Type Name GUIDO RAPONE JR.
Title PRESIDENT