



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. 547223		2. Name of Corporation ROMAR ENTERPRISES, INC.		
3. Street Address Principal Business Office 1335 Woonsocket Hill Road		City North Smithfield	State RI	Zip 02896
4. Business Phone No. 401-486-6107		5. State of Incorporation Rhode Island		
6. Brief Description of the Character of Business Conducted in Rhode Island Marketing				
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
President Name Robert A. Martufi, Jr.		Vice President Name		
Street Address 1335 Woonsocket Hill Road		Street Address		
City North Smithfield	State RI	Zip 02896	City	State
Secretary Name Robert A. Martufi, Jr.		Treasurer Name Robert A. Martufi, Jr.		
Street Address 1335 Woonsocket Hill Road		Street Address 1335 Woonsocket Hill Road		
City North Smithfield	State RI	Zip 02896	City North Smithfield	State RI
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
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	Class/Series	Par Value
		1000	Common	No Par Value

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 29 2012

Check No. _____

By: 4699

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 Robert A. Martufi, Jr. Date 2/26/12

Robert A. Martufi, Jr.

Print or Type Name

President

Title