



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. 18313		2. Name of Corporation Red Carpet Smoke Shop Incorporated			
3. Street Address Principal Business Office 108-1/2 Waterman Street			City Providence	State RI	Zip 02906
4. Business Phone No. (401) 421-4499		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island Wholesale, retail and mail order sales of tobaccos.					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Eric A. Chaika			Vice President Name		
Street Address 108-1/2 Waterman Street			Street Address		
City Providence	State RI	Zip 02906	City	State	Zip
Secretary Name Eric A. Chaika			Treasurer Name Eric A. Chaika		
Street Address 108-1/2 Waterman Street			Street Address 108-1/2 Waterman Street		
City Providence	State RI	Zip 02906	City Providence	State RI	Zip 02906
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	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
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	Class/Series	Par Value
			300	Common	No Par Value
THIS SECTION MUST BE COMPLETED			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.

FILED

File Date **MAR 01 2012**

Check No. **By [Signature]**

By: **1577**

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.

Eric Chaika **2/28/12**
Signature Date
Eric A. Chaika
Print or Type Name
President
Title