



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 2010

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 160206		2. Name of Corporation ROSIS JEWELRY INC.			
3. Street Address Principal Business Office 95 HATHAWAY ST. Ste 12		City PROVIDENCE		State RI	Zip 02907
4. Business Phone No. 401-837-4842		5. State of Incorporation RHODE ISLAND			
6. Brief Description of the Character of Business Conducted in Rhode Island JEWELRY MANUFACTURING					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name SREYROTH TOUCH			Vice President Name SREYROTH TOUCH		
Street Address 483 LAUREL AVE			Street Address 483 LAUREL AVE		
City CRANSTON		State RI	Zip 02920	City CRANSTON	
Secretary Name SREYROTH TOUCH		Treasurer Name SREYROTH TOUCH			
Street Address 483 LAUREL AVE			Street Address 483 LAUREL AVE		
City CRANSTON		State RI	Zip 02920	City CRANSTON	
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name SREYROTH TOUCH			Director Name NONE		
Street Address 483 LAUREL AVE			Street Address		
City CRANSTON		State RI	Zip 02920	City	
Director Name NONE			Director Name NONE		
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					
Number of Shares 100		Class/Series COMMON		Par Value NO PAR	
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.					

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 SECRETARY OF STATE
 CORPORATIONS DIV

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 _____

Check No. **MAR 02 2012**

By: **16528/ 11:39**

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: Date: **02/28/2012**

SREYROTH TOUCH
Print or Type Name

PRESIDENT
Title