



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. 161199		2. Name of Corporation Cheap Wholesale Jewelry.com, Inc.		
3. Street Address Principal Business Office 8 Industrial Lane			City Johnston	State RI
4. Business Phone No. 401-453-0550			5. State of Incorporation Rhode Island	
6. Brief Description of the Character of Business Conducted in Rhode Island Internet jewelry sales and any other lawful business.				
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
President Name Summer Guerrieri			Vice President Name Gerald Kent, Jr.	
Street Address same as above			Street Address same as above	
City	State	Zip	City	State
Secretary Name Summer Guerrieri			Treasurer Name Summer Guerrieri	
Street Address same as above			Street Address same as above	
City	State	Zip	City	State
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
Director Name Summer Guerrieri			Director Name Gerald Kent, Jr.	
Street Address same as above			Street Address same as above	
City	State	Zip	City	State
Director Name			Director Name	
Street Address			Street Address	
City	State	Zip	City	State
9. SHARES AUTHORIZED				
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.				
10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>				
ISSUED SHARES — THIS SECTION MUST BE COMPLETED				
Number of Shares		Class/Series		Par Value
200		Common		No Par Value
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

MAR 02 2012

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.

File Date	BY
Check No.	
FOR SECRETARY OF STATE USE ONLY	

Signature: *[Handwritten Signature]*
Date: 2-27-12

Signature: *[Handwritten Signature]* Date: 2-27-12
Print or Type Name: Summer Guerrieri
Title: President