



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State - Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR** 2012

Filing Period: January 1 - March 1 • This report must be typed or printed legibly.

Filing Fee: \$50.00 • FAILURE TO FILE THIS REPORT BY MARCH 31 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. <u>89144</u>		2. Exact name of the Corporation <u>FinastKind Inc.</u>			
3. Principal office address <u>2090 Main Rd.</u>		City <u>Tiverton</u>	State <u>RI</u>	Zip <u>02878</u>	
4. Business Phone No. <u>401-624-2293</u>		5. State of Incorporation <u>Rhode Island</u>			
6. Brief description of the character of business conducted in Rhode Island <u>To own, equip, purchase, sell, charter and navigate boats. To catch, sell purchase all fish products.</u>					
President Name <u>Richard Robert Walz</u>		Vice-President Name <u>NONE</u>			
Street Address <u>2090 Main Rd</u>		Street Address			
City <u>Tiverton</u>	State <u>RI</u>	Zip <u>02878</u>	City	State	Zip
Secretary Name <u>Richard Robert Walz</u>		Treasurer Name <u>Richard Robert Walz</u>			
Street Address <u>2090 Main Rd.</u>		Street Address <u>2090 Main Rd</u>			
City <u>Tiverton</u>	State <u>RI</u>	Zip <u>02878</u>	City <u>Tiverton</u>	State <u>RI</u>	Zip <u>02878</u>
Director Name <u>NONE</u>		Director Name <u>NONE</u>			
Street Address		Street Address			
City	State	Zip	City	State	Zip
Director Name <u>NONE</u>		Director Name <u>NONE</u>			
Street Address		Street Address			
City	State	Zip	City	State	Zip
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 <u>NONE</u>		CLASS/SERIES	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.

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.

Richard Walz 3/15/12  
Signature of Authorized Representative Date

Richard Robert Walz  
Print or Type Name of Authorized Representative