



State of Rhode Island and Providence Plantations
Office of the Secretary of State

Fee: \$20.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Foreign Non-Profit
Annual Report**

Filing Period: June 1 - June 30

In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2012

1. Corporate ID No. 000753565

2. Name of Corporation Birthday Wishes

3. State of Incorporation

State: MA

4. Corporate Address in Rhode Island

No. and Street: 142 COTTAGE STREET

City or Town: PAWTUCKET

State: RI Zip: 02860 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street: 11 HOMER STREET

City or Town: NEWTON State: MA Zip: 02459 Country: USA

6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island

TO PROVIDE BIRTHDAY PARTIES TO HOMELESS CHILDREN

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	DAVID DIPASQUALE	93 CARRIAGE HILL CIRCLE SOUTHBORO , MA 01772 USA
TREASURER	GLENN RICCIARDELLI	3 CEDAR LANE MEDFIELD, MA 02052 USA
CEO	LISA VASILOFF	80 EAST QUINOBEQUIN ROAD NEWTON, MA 02468 USA
DIRECTOR	ROSENIE CLERVIL	4 GLENMORE TERRACE NEWTON, MA 02461 USA
DIRECTOR	CATHERINE COLINVAUX	500 GREEN STREET NORTHBOROUGH, MA 01532 USA
DIRECTOR	COLLEEN GRANAHAN	257 LAKE STREET NEWTON, MA 02461 USA
DIRECTOR	CAROL ZWANGER	72 CUSHING STREET CAMBRIDGE, MA 02138 USA
DIRECTOR	DAVID RUFO	5 CLINTON RD. WELLESLEY, MA 02481 USA

8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78

LISA VASILOFF BIRTHDAY WISHES INC. 142 COTTAGE STREET PAWTUCKET , RI 02860

9. This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver, or Trustee.

Signed this 7 Day of June, 2012 at 2:30:34 PM. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By DAVID DIPASQUALE
Signature of Officer of the Corporation

President or Vice President or Secretary or Assistant Secretary or
 Treasurer or Receiver or Trustee (check one)

This report cannot be accepted for filing if an officer has executed the form and he/she is not listed in Section 7.

Form No. 631
Revised 09/07