

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 Filling Period: January 1 Moreh 4 This	The state of the s	
LUCLI CORPORATION ANNUAL	REPORT FOR THE VEAR	
Filing Period: January & Morek 4 The	THE VILLION THE LEAR	2013

1. Entity ID No.	2. Exact n	• FAILURE TO FILE THIS REPORT BY MARCH 31 WILL RESULT IN A \$25.00 PENALTY FEE. 2. Exact name of the Corporation				
788883		- Exact factor of the Corporation				
	:	Gold Holdings,	Inc.			
Principal office addres			City	10		
300 Pippin Orchard Road			Cranston	State	Zip	
4. Business Phone No.			5. State of Incorpo	RI	02921	
331–2720 6. Brief description of the character of business conducted in Rhode Islan			1			
 Brief description of the 	character of busines	ss conducted in Rhode Isla	and	ind		
real estate h	olding compa	any				
President Name	(NAMES AND ADD	RESSES) ("X" BOX FOR	ATTACHMENT			
All - D G 3 to			ATTACHMENT) Vice-President Name			
Allan D. Goldberg Street Address			Gabriela			
300 Pippin Orchard Road			Street Address			
City			300 Pippin Orchard Road			
Cranston	State	Zip	City	State	Zip	
Secretary Name	RI	02921	Cranston	RI	_ 02921	
Gabriela Gold	lhero		Treasurer Name		02921	
Street Address	nerg		Allan D. Goldberg			
300 Pippin Or	chard Daas		Street Address			
City	State	17:-	300 Pippin Orchard Road			
Cranston		Zip	City	State	Zip	
LIST ALL DIRECTORS	RI	02921	Cranston	RI	02921	
rector Name	(HAMES AND ADD	PRESSES) ("X" BOX FOR	ATTACHMENT)		1 02/21	
treet Address			Director Name			
			Street Address			
ity	State	Zip	City			
		· ·	Jily .	State	Zip	
irector Name			Director Name			
			Silver Marile		 _	
treet Address			Street Address			
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ty	State	Zip	City	Total		
0114				State	Zip	
SHARES AUTHORIZED			10. SHARES ISSUE	\"Y" BOY FOR 4====		
ie information :-			NUMBER OF SHARES	CLASS/SERIES		
is information is current State. Changes require		Office of the Secretary		JENGG/SERIES	PAR VALUE	
State. Changes require an additional filing. se Section 9 of instruction sheet.			1000	common	no par value	
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his report must be execute	ed on behalf of the o	Orpo ath A Car other	d conservation in the			
	this report must	orpo a the Lan authorize be executed on behalf of	u representative. If the o the corporation by the =	corporation is in the hand	s of a receiver or trustee,	
			,	reciver of trustee.		
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heck No		VALLE # 12 COLD	and that all stateme	ents contained herein a	re true and correct	
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By:	Bv	LIIMC)	Constitute of A		!////	
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	TE HEE ONLY		 Signature of Authoriz 	recorrepresentative	Date	
OR SECRETARY OF STA	TE USE ONLY	+ 0994	_Allan D. G		Date Date	