



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 2013

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.

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|--|--------------------|---|--|--------------------|---------------------|
| 1. Entity ID No. 115671 | | 2. Exact name of the Corporation Anchor Steam, Inc. | | | |
| 3. Principal office address 44 Broadway | | City Newport | | State RI | Zip 02840 |
| 4. Business Phone No. (401)847-4155 | | 5. State of Incorporation Rhode Island | | | |
| 6. Brief description of the character of business conducted in Rhode Island Tattoo Services | | | | | |
| President Name Jennifer E. Clinch-Guertin | | | Vice-President Name Timothy J. Guertin | | |
| Street Address 263 Stillwater Road | | | Street Address 263 Stillwater Road | | |
| City Smithfield | State RI | Zip 02917 | City Smithfield | State RI | Zip 02917 |
| Secretary Name Jennifer E. Clinch-Guertin | | | Treasurer Name Timothy J. Guertin | | |
| Street Address 263 Stillwater Road | | | Street Address 263 Stillwater Road | | |
| City Smithfield | State RI | Zip 02917 | City Smithfield | State RI | Zip 02917 |
| Director Name Jennifer E. Clinch-Guertin | | | Director Name Timothy J. Guertin | | |
| Street Address 263 Stillwater Road | | | Street Address 263 Stillwater Road | | |
| City Smithfield | State RI | Zip 02917 | City Smithfield | State RI | Zip 02917 |
| Director Name | | | Director Name | | |
| 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 600 | | |
| | | | CLASS/SERIES Common | | |
| | | | PAR VALUE None | | |

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

FEB 01 2013
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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.

Jennifer E. Clinch-Guertin
Signature of Authorized Representative

1-27-13

Date

Jennifer E. Clinch-Guertin

Print or Type Name of Authorized Representative