

1. Entity ID No.

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

2013 PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

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

2. Exact name of the Corporation

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

110828	Harbo	Harbour Galleries, Inc.					
3. Principal office address 655 Main Street, Suite 212			City East Greenwich	<u></u>	State RI	Zip 02818	
4. Business Phone No. 401-884-6221			5. State of Incorporation Rhode Island				
Brief description of the cha Jewelry - wholesale,			d				
President Name Elaine E. Roberts			Vice-President Name Kenneth G. Roberts				
Street Address 655 Main Street, Suite 212			Street Address 655 Main Street, Suite 212				
City East Greenwich	State RI	Zip 02818	City East Greenwich		State RI	Zip 02818	
Secretary Name Elaine E. Roberts			Treasurer Name Elaine E. Roberts				
Street Address 655 Main Street, Suite 212			Street Address 655 Main Street, Suite 212				
City *East Greenwich	State RI	Zip 02818	City East Greenwich		State RI	Zip 02818	
8. LIST <u>ALL</u> DIRECTORS (N	KAMES AND ADD	RESSES) ("X" BOX FOR	ATTACHMENT) 2 3/2		Car No account		
Director Name Elaine E. Roberts			Director Name Kenneth G. Roberts				
Street Address 655 Main Street, Suite	e 212		Street Address 655 Main Street	, Suite 2	12		
City East Greenwich	State RI	Zip 02818	City East Greenwich		State RI	Zip 02818	
Director Name			Director Name				
Street Address			Street Address		·····		
City	State	Zip	City		State	Zip	
R. SHARES AUTHORIZED.			(in station in the state of the	i and	30 10 (17)(4)		
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			PAR VALUE	
			100	COMMON		NONE	
This report must be executed	d on behalf of the	corporation by an authorize	d representative. If the o	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 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. FEB 0 6 2013

BY 18035 Signature of Authorized Representative

Date

9/2013

Elaine E. Roberts, President