

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street Providence, RI 02904-2615 401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2013

2. Name of Corporation
Rachael Miller Designs, Ltd.

Filing Period: January 1 - March 1 • Filing Fee: \$50.00° • THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.

* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(e&d)) is subject to a penalty fee of \$25.00. 1. Corporate ID No. 541039

3. Street Address Principal Business Office 91 Shaw Avenue			City Cranston	State RI	2ip 02905
4. Business Phone No. 5. State of Incorporation A01-788-4060 Rhode Island					
6. Brief Description of the C Designer Services	Character of Business Conduc	ted in Rhode Island			
	RESSES OF THE OFFI	CERS: ("X" BOX FOR ATTA	CHMENT) 🔲 FILL IN	SPACES BEFORE USING	G ATTACHMENTS
President Name			Vice President Name		
Rachael Miller			Rachael Miller		
Street Address 91 Shaw Avenue			Street Address 91 Shaw Avenue		
City Cranston	State RI	^{Zip} 02905	City Cranston	State RI	^{Zip} 02905
Secretary Name Rachael Miller			Treasurer Name Rachael Miller		
Street Address 91 Shaw Avenue			Street Address 91 Shaw Avenue		
City Cranston	State RI	^{Zip} 02905	City Cranston	State RI	^{Zip} 02905
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATT. Director Name Rachael Miller			ACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Director Name		
Street Address			Street Address		
91 Shaw Avenue					
City Cranston	State RI	Zip 02905	City	State	Zip
Director Name	***************************************	***************************************	Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHOR	IZED			("X" BOX FOR ATTA	
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	Class/Series	Par Value
			1000	STK	\$1.00
			有人能力等		*
This report must be enthis report must be ex	executed on behalf of the	ne corporation by an authorize e corporation by the receiver	or trustee. Under penalty of	perjury, I declare and affirr	n that I have examined this report
File Date Check No. File Date FEB 0 6 2013			including any accompanying schedules and statements, and that all statements contained herein are true and correct.		
			Signature	1/200	Date
			Rachael Mi		
Ву:			Trint or Type Nam	e	
FOR SECRETARY OF STATE USE ONLY			President		
L JON SECRETA	3, 3, 11, 35B 0(3B)	.114.44	Title	· · · · · · · · · · · · · · · · · · ·	Form 630 Rev. 08/08