

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

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(cc/d)) is white to a payable fee of \$25.00

subject to a penalty fee of \$25.00.					
1. Corporate ID No. 15031	2. Name of Corporation SUGAR N' SPICE, INC.				
3. Street Address Principal Business Office 80 BRIARWOOD			MIDDLETOWN	State RI	<sup>Ζφ</sup> 02842
4. Business Phone No. 401-864-2700		5. State of Incorporation RHODE ISLAND		<b>-</b>	
6. Brief Description of the Character of	l Business Conducted in R	bode Island			
PROPERTY MANAGEMENT 7. NAMES AND ADDRESSES	OF THE OFFICERS:	("X" BOX FOR ATTA		CES BEFORE USING A	ITACHMENTS
President Name PAUL A. DEMESSIANOS			Vice President Name PAULA A. PATALANO		
Street Address 710 WHITMARSH LANE			Street Address 80 BRIARWOOD		
KEY WEST	State FL	<sup>Ζφ</sup> 33040	City MIDDLETOWN	State RI	<sup>Zip</sup> 02842
Secretary Name PAUL A. DEMESSIANOS			Treasurer Name DENNIS DEMESSIANOS		
Street Address 710 WHITMARSH LANE			Street Address 80 BRIARWOOD		
KEY WEST	State FL	<sup>Zip</sup> 33040	City MIDDLETOWN	State RI	<sup>Zip</sup> 02842
8. NAMES AND ADDRESSES (	OF THE DIRECTORS	"("X" BOX FOR ATT		ACES BEFORE USING	ATTACHMENTS
Director Name			Director Name		
Street Address			Street Address		
City·	State	Zip	City	State	Zip
Director Name			Director Name	ı	I
Street Address	····		Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED (*2) ISSUED SHARES — THIS SECTION	and the first of the second se	(ENT)
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
			500	COMMON	NO PAR
			7 <del>9</del> 10 4 5 5 5		
This report must be executed or this report must be executed or				pration is in the hands o	of a receiver or trust

this report must be executed on behalf of the corpor		esentative. If the corporation is in the hands of a receiver of trustee, tee.
	FILED	
	FEB 2 6 2013	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.
File Date  Check No.	BY 1377	Signature /2/22/20/2 PAUL DEMESSIANOS
By: FOR SECRETARY OF STATE USE ONLY		Print or Type Name  Res  Title