



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.

1. Entity ID No. 000144039		2. Exact name of the Corporation PRINCESS SPORTS, INC.			
3. Principal office address 93 ASHBURNE STREET			City PAWTUCKET	State RI	Zip 02861
4. Business Phone No. (401)727-0621			5. State of Incorporation RHODE ISLAND		
6. Brief description of the character of business conducted in Rhode Island OPERATE ESTABLISHMENTS					
President Name GERMANO ARRUDA			Vice-President Name GERMANO ARRUDA		
Street Address 93 ASHBURNE STREET			Street Address 93 ASHBURNE STREET		
City PAWTUCKET	State RI	Zip 02861	City PAWTUCKET	State RI	Zip 02861
Secretary Name GERMANO ARRUDA			Treasurer Name GERMANO ARRUDA		
Street Address 93 ASHBURNE STREET			Street Address 93 ASHBURNE STREET		
City PAWTUCKET	State RI	Zip 02861	City PAWTUCKET	State RI	Zip 02861
8. INSTALLED DIRECTORS (NAME, STREET ADDRESS, CITY, STATE, ZIP)					
Director Name NONE			Director Name NONE		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name NONE			Director Name NONE		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORITY					
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
			100	CWP	\$10.00

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

MAR 01 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.

Germano Arruda **02/28/2013**
 Signature of Authorized Representative Date

GERMANO ARRUDA
 Print or Type Name of Authorized Representative