



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-261
401.222.304

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(c&d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 33807 2. Name of Corporation O'Dell Enterprises

3. Street Address Principal Business Office 120 Cedar Lane City Seekonk State MA. Zip 02771

4. Business Phone No. 401-480-6197 5. State of Incorporation Rhode Island

6. Brief Description of the Character of Business Conducted in Rhode Island

Rental Liguon

7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name Pearl O'Dell Vice President Name Pearl O'Dell

Street Address 120 Cedar Lane Street Address 120 Cedar Lane

City Seekonk State MA. Zip 02771 City Seekonk State MA. Zip 02771

Secretary Name Pearl O'Dell Treasurer Name Pearl O'Dell

Street Address 120 Cedar Lane Street Address 120 Cedar Lane

City Seekonk State MA. Zip 02771 City Seekonk State MA. Zip 02771

8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name Pearl O'Dell Director Name _____

Street Address 120 Cedar Lane Street Address _____

City Seekonk State MA. Zip 02771 City _____ State _____ Zip _____

Director Name _____ Director Name _____

Street Address _____ Street Address _____

City _____ State _____ Zip _____ City _____ State _____ Zip _____

9. SHARES AUTHORIZED

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.

10. SHARES ISSUED ("X" BOX FOR ATTACHMENT)

ISSUED SHARES -- THIS SECTION MUST BE COMPLETED

Number of Shares	Class/Series	Par Value
<u>100</u>	<u>No Par</u>	<u>0</u>

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
File Date _____
Check No. MAR 19 2013
By: 193006
FOR SECRETARY OF STATE USE ONLY

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.

Pearl O'Dell 2-22-13
Signature Date

Pearl O'Dell
Print or Type Name

President
Title