

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 2012

Filing Period: January Filing Fee: \$50.00	uary 1 - March 1 • T • FAILURE TO FIL	This report must be typ E THIS REPORT BY M	ped or printed legibly. IARCH 31 WILL RESU	JLT IN A \$25.00 PENA	LTY FEE.	
1. Entity ID No.	2. Exact nam	2. Exact name of the Corporation				
17303	Howie h	Howie Holland Advertising, Inc.				
3. Principal office address 24 Knapton Street			City Barrington	State RI	Zip 02806	
4. Business Phone No. 401-247-1101			5. State of Incorporation Rhode Island			
6. Brief description of the Advertising Agend		conducted in Rhode Island	d			
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President Name Howard Holland			Vice-President Name Temma Holland			
Street Address 24 Knapton Street			Street Address 24 Knapton Street			
City Barrington	State RI	Zip 02806	City Barrington	State RI	Zip 02806	
Secretary Name Howard Holland			Treasurer Name Temma Holland			
Street Address 24 Knapton Street			Street Address 24 Knapton Street			
City Barrington	State RI	Zip 02806	City Barrington	State RI	02806 50	
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Director Name Howard Holland	A Cur		Director Name		72: 01A	
Street Address 24 Knapton Street			Street Address		42	
City Barrington	State RI	Zip 02806	City	State	Zip	
Director Name			Director Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
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Andread Control of the Control of th	allegel (1992) i sa na na pale le reconaix e della carre i calleda e describibilità	ing figure black retailed a photonic and to This is been an immediately attribute and	NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	
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.			1000	Common	No Par	
	cuted on behalf of the	corporation by an authoriz	red representative. If the o	corporation is in the hands	of a receiver or trustee,	
***	this report mu	st be executed on behalf o	the corporation by the re Under penalty of pe	eceiver or trustee. erjury, I declare and affir		
Filesonic Gricon 19		FILED	and that all stateme	ents contained herein ar	e true and correct.	
Control of the contro		N 02 2014		Signature of Authorized Representative Date Temma Holland		
13		N 02 2014			Date	

		Under penalty of perjury, I declare and aff	
्रो <mark>ति</mark> ।(तिकास	FILED	this report, including any accompanying and that all statements contained herein	
্রিলেন এন ক্রি	N 02 2014	Signature of Authorized Representative	
्रीत् ो क्ष्यचनसम्बद्धाः ।	9-21405	Temma Holland	
Form No. 630 Revised: 01/2012	A.A. 12:24	Print or Type Name of Authorized Represent $ ho m$.	