



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

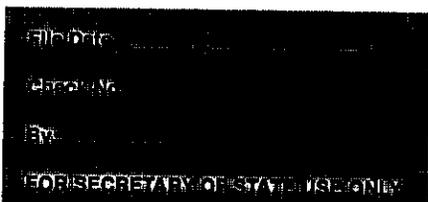
PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2014

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. 1298		2. Exact name of the Corporation Ariosti Associates LTD			
3. Principal office address 533 Switch Road, The Loft			City Wood River Junction	State RI	Zip 02894
4. Business Phone No. 401-364-6792			5. State of Incorporation Rhode Island		
6. Brief description of the character of business conducted in Rhode Island Music Enterprises					
President Name Joseph S. Ceo			Vice-President Name Joan H. Ceo		
Street Address 533 Switch Road			Street Address 533 Switch Road		
City Wood River Junction	State RI	Zip 02894	City Wood River Junction	State RI	Zip 02894
Secretary Name Joan Ceo			Treasurer Name Joan H. Ceo		
Street Address 533 Switch Road			Street Address 533 Switch Road		
City Wood River Junction	State RI	Zip 02894	City Wood River Junction	State RI	Zip 02894
LIST ALL DIRECTORS, DATE AND ADDRESS BY BOX FOR EACH ONE					
Director Name Joseph S. Ceo			Director Name Joan H. Ceo		
Street Address 533 Switch Road			Street Address 533 Switch Road		
City Wood River Junction	State RI	Zip 02894	City Wood River Junction	State RI	Zip 02894
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
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.			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
			100	common	no par

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
JAN 08 2014
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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.

Joseph S. Ceo 1-4-2014
 Signature of Authorized Representative Date

Joseph S. Ceo
 Print or Type Name of Authorized Representative