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.	2. Exact name of the Corporation
89461	**BSK ENTERPRISE, INC.**

3. Principal office address	City	State	Zip
Post Office Box 1131	**Coventry**	**RI**	**02816**

4. Business Phone No.	5. State of Incorporation
401-486-9404	**Rhode Island**

6. Brief description of the character of business conducted in Rhode Island
Purchase, sell, lease, rent or otherwise deal with real estate

7. LIST ALL OFFICERS' NAMES AND ADDRESSES (X' BOX FOR ATTACHMENT) ☐

President Name			Vice-President Name		
Bryan Soscia			**Kathleen Soscia**		
Street Address			Street Address		
One Doric Court			**One Doric Court**		
City	State	Zip	City	State	Zip
Coventry	**RI**	**02816**	**Coventry**	**RI**	**02816**
Secretary Name			~~Treasurer~~ Name		
Bryan Soscia			**Bryan Soscia**		
Street Address			Street Address		
Same			**Same**		
City	State	Zip	City	State	Zip

8. LIST ALL DIRECTORS' NAMES AND ADDRESSES (X' BOX FOR ATTACHMENT) ☐

Director Name			Director Name		
None					
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip

9. SHARES AUTHORIZED	10. SHARES ISSUED (X' BOX FOR ATTACHMENT) ☐		
	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.	1,000	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 10 2014
BY 45243
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.

Bryan Soscia 1-7-14
Signature of Authorized Representative Date

Bryan Soscia - President
Print or Type Name of Authorized Representative

Form No. 630
Revised: 01/2012