



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 02904-2615
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2014

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. 83963		2. Name of Corporation Stromberg Pets, Inc.		
3. Street Address Principal Business Office 726 Reservoir Avenue			City Cranston	State RI
4. Business Phone No. 401-943-7775		5. State of Incorporation Rhode Island		
6. Brief Description of the Character of Business Conducted in Rhode Island THE OPERATION OF A PET STORE				
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
President Name Diane Stromberg		Vice President Name Kraig Stromberg		
Street Address 17 Yeles Avenue		Street Address 17 Yeles Avenue		
City Rockville	State RI	Zip 02873	City Rockville	State RI
Secretary Name Tracy L. Stromberg		Treasurer Name Kraig Stromberg		
Street Address 17 Yeles Avenue		Street Address 17 Yeles Avenue		
City Rockville	State RI	Zip 02873	City Rockville	State RI
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
Director Name Diane Stromberg		Director Name Kraig Stromberg		
Street Address 17 Yeles Lane		Street Address 17 Yeles Lane		
City Rockville	State RI	Zip 02873	City Rockville	State RI
Director Name		Director Name		
Street Address		Street Address		
City	State	Zip	City	State
9. SHARES AUTHORIZED		10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
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.		ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
		Number of Shares 100	Class/Series	Par Value

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 SECRETARY OF STATE
 CORPORATIONS DIV

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 FEB 25 2014

Check No. BY DA 218293

By: _____

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.

Signature _____ Date 2-6-14
Diane Stromberg
 Print or Type Name
President
 Title