



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. 159500		2. Exact name of the Corporation THE ART OF THE KITCHEN, LTD			
3. Principal office address 951 HOPE STREET			City PROVIDENCE	State RI	Zip 02906
4. Business Phone No. 401-383-7105		5. State of Incorporation RHODE ISLAND			
6. Brief description of the character of business conducted in Rhode Island Design, Purchase, Sell and Resell and Install Kitchen Designs, Equipment & Cabinets.					
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name Kathy Del Sesto			Vice-President Name Kathy Del Sesto		
Street Address 951 Hope Street			Street Address 951 Hope Street		
City Providence	State RI	Zip 02906	City Providence	State RI	Zip 02906
Secretary Name Kathy Del Sesto			Treasurer Name Kathy Del Sesto		
Street Address 951 Hope Street			Street Address 951 Hope Street		
City Providence	State RI	Zip 02906	City Providence	State RI	Zip 02906
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name Kathy Del Sesto			Director Name		
Street Address 951 Hope Street			Street Address		
City Providence	State RI	Zip 02906	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) <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.			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
			1,000	Common	\$0.01
			100	Common	\$0.01

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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.

File Date _____

Check No _____

By: _____

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.

Arthur S. Russo Jr. 3/7/2014
 Signature of Authorized Representative Date

FOR SECRETARY OF STATE USE ONLY

Arthur S. Russo Jr. Authorized Agent
 Print or Type Name of Authorized Representative

FILED
MAR 07 2014
 By 49-219470
A.A.