



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

2015  
~~2014~~

**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR**

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.

RECEIVED  
 SECRETARY OF STATE  
 CORPORATIONS DIV  
 2015 JAN 21 AM 9:26

1. Entity ID No. <b>12070</b>		2. Exact name of the Corporation <b>Rooms to Grow, Ltd</b>			
3. Principal office address <b>117 Chestnut Street</b>			City <b>Warwick</b>	State <b>RI</b>	Zip <b>02888</b>
4. Business Phone No. <b>401-467-2990</b>			5. State of Incorporation <b>Rhode Island</b>		
6. Brief description of the character of business conducted in Rhode Island <b>to conduct, maintain and operate a furniture store at retail and wholesale</b>					
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name <b>Henry Ritchotte</b>			Vice-President Name <b>Susan Martin</b>		
Street Address <b>245 Hardig Road</b>			Street Address <b>233 Riverside Drive</b>		
City <b>Warwick</b>	State <b>RI</b>	Zip <b>02886</b>	City <b>Warwick</b>	State <b>RI</b>	Zip <b>02913</b>
Secretary Name <b>David D'Ambruoso</b>			Treasurer Name <b>Paula Ritchotte</b>		
Street Address <b>130 Heath Avenue</b>			Street Address <b>245 Hardig Road</b>		
City <b>Warwick</b>	State <b>RI</b>	Zip <b>02888</b>	City <b>Warwick</b>	State <b>RI</b>	Zip <b>02886</b>
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name <b>Henry Ritchotte</b>			Director Name <b>Susan Martin</b>		
Street Address <b>As above</b>			Street Address <b>As above</b>		
City	State	Zip	City	State	Zip
Director Name <b>Paula Ritchotte</b>			Director Name <b>David D'Ambruoso</b>		
Street Address <b>As above</b>			Street Address <b>As above</b>		
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
			<b>600</b>	<b>Common</b>	<b>0</b>

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: \_\_\_\_\_

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**FILED**  
 JAN 21 2015  
 240694  
 KM

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.

*Henry Ritchotte*  
 Signature of Authorized Representative  
 Date **01/20/15**  
 Henry Ritchotte  
 Print or Type Name of Authorized Representative