



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 **2015**

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. 121216		2. Exact name of the Corporation Swarovski Financial Services Corp.			
3. Principal office address One Kenney Drive			City Cranston	State RI	Zip 02920
4. Business Phone No. 401-463-6400			5. State of Incorporation RI		
6. Brief description of the character of business conducted in Rhode Island To engage in the maintenance & management of intangible investments & the collection & distribution of the income from such investments					
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>					
President Name			Vice-President Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>					
Director Name			Director Name		
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) <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	NPV

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: _____
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.

Robina Poirier **01/16/2015**
 Signature of Authorized Representative Date
Robin A. Poirier *Asst. Corp Secretary*
 Print or Type Name of Authorized Representative

FILED

JAN 26 2015

BY 001314

**Swarovski Financial Services Corp.
Officers & Directors**

Officers:

Title: (Appointed annually in March)

Douglas P. Brown
One Kenney Drive
Cranston, RI 02920

Executive Vice President, Treasurer

Edward J. Capobianco
One Kenney Drive
Cranston, RI 02920

Corporate Secretary

Robin A. Poirier
One Kenney Drive
Cranston, RI 02920

Assistant Corporate Secretary

Directors:

NONE - Swarovski Financial Services Corp. is a Rhode Island Close Corporation and as such is not required to appoint directors.

FILED

JAN 26 2015

BY

#001314