



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. 10475		2. Exact name of the Corporation TIME PLATING, INCORPORATED					
3. Principal office address 30 Libera Street				City Cranston		State RI	Zip 02920
4. Business Phone No. 401-943-3020				5. State of Incorporation Rhode Island			
6. Brief description of the character of business conducted in Rhode Island Manufacturing, plating, distribution and sale of jewelry and any other lawful business.							
President Name Michael Duffy				Vice-President Name Jose Santana			
Street Address same as above				Street Address same as above			
City		State	Zip	City		State	Zip
Secretary Name Doris DiMeo				Treasurer Name Tony Cheng			
Street Address same as above				Street Address same as above			
City		State	Zip	City		State	Zip
Director Name Robert A. DiMeo				Director Name Tony Cheng			
Street Address same as above				Street Address same as above			
City		State	Zip	City		State	Zip
Director Name				Director Name			
Street Address				Street Address			
City		State	Zip	City		State	Zip
0 SHARES AUTHORIZED				10 SHARES ISSUED (SEE BOX FOR ATTACHMENT)			
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	
				100	Common	No Par Value	

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

MAR 11 2015

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 hereon are true and correct.

Signature of Authorized Representative

Michael Duffy, President

Date

2/25/15

Print or Type Name of Authorized Representative

29-244314