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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.	2. Exact name of the Corporation			
90390	Vangel Jewelers, INC.			
3. Principal office address: 10 Village Plaza Way		City: N. Scituate	State: RI	Zip: 02857
4. Business Phone No.: 401-934-0350		5. State of Incorporation: Rhode Island		
6. Brief description of the character of business conducted in Rhode Island: Jewelers				

7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) ☐

President Name	Street Address	City	State	Zip
Christopher T. Vangel	103 Central Pike	N. Scituate	RI	02857

Vice-President Name	Street Address	City	State	Zip
William R. Vangel, JR	137 Foster Center Rd	Foster	RI	02857

Secretary Name	Street Address	City	State	Zip
William R. Vangel, JR	139 Foster Center Rd.	Foster	RI	02857

Treasurer Name	Street Address	City	State	Zip
Christopher T. Vangel	103 Central Pike	N. Scituate	RI	02857

8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) ☐

Director Name	Street Address	City	State	Zip
Director Name	Street Address	City	State	Zip

Director Name	Street Address	City	State	Zip
Director Name	Street Address	City	State	Zip

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SECRETARY OF STATE
CORPORATIONS DIV.

9. SHARES AUTHORIZED

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.

10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐

NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
192	Common Stock	$0, shares

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.

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.

Christopher T. Vangel 3/13/2015
Signature of Authorized Representative — Date

Christopher T. Vangel
Print or Type Name of Authorized Representative

File Date:
Check No:
By:
FOR SECRETARY OF STATE USE ONLY

FILED
MAR 13 2015
By 244615
A.A

Form No. 630
Revised: 01/2012
118197-1-1030619