



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State  
Matthew A. Brown, Secretary of State

Corporations Division  
100 North Main Street  
Providence, RI 02903-1335  
401.222.3040

**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004**

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1 Corporate ID No. <b>51700</b>		2 Name of Corporation <b>HUDSON JEWELRY COMPANY</b>			
3 Street Address Principal Business Office <b>26 GREENVILLE AVE</b>			City <b>JOHNSTON</b>	State <b>RI</b>	Zip <b>02919</b>
4 Business Phone No. <b>751-0077</b>		5 State of Incorporation <b>RHODE ISLAND</b>		6 SIC Code <b>1883</b>	
7 Brief Description of the Character of Business Conducted in Rhode Island <b>JEWELRY CONTRACT SHOP (SOLDERING AND STONE SETTING)</b>					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name <b>LINDA PIZZUTI</b>			Vice President Name <b>NONE</b>		
Street Address <b>3 SPARROW CIR</b>			Street Address		
City <b>W. WARWICK</b>	State <b>RI</b>	Zip <b>02893</b>	City	State	Zip
Secretary Name <b>RICHARD PIZZUTI</b>			Treasurer Name <b>JAMES A. PIZZUTI</b>		
Street Address <b>3 SPARROW CIR</b>			Street Address <b>1 WILLOW FLEN CIR</b>		
City <b>W. WARWICK</b>	State <b>RI</b>	Zip <b>02893</b>	City <b>WARWICK</b>	State <b>RI</b>	Zip <b>02899</b>
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name <b>NONE</b>			Director Name <b>NONE</b>		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name <b>NONE</b>			Director Name <b>NONE</b>		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class Series	Par Value	Number of Shares	Class Series	Par Value
<b>600 COMM NO PAR VALUE</b>			<b>NONE</b>		

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



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File Date 3/5/04  
Check No. 13572  
By: SC  
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.

Signature of Officer [Signature] Date 3-01-04  
Print or Type Name of Officer JAMES A. PIZZUTI  
Title of Officer TREAS.