



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. 18037		2. Exact name of the Corporation HOUSE OF CLOCKS, INC.			
3. Principal office address 2352 MENDON ROAD		City CUMBERLAND		State RI	Zip 02864-3731
4. Business Phone No. 401-658-2083		5. State of Incorporation RHODE ISLAND			
6. Brief description of the character of business conducted in Rhode Island DEALING WITH WATCHES AND CLOCKS					
(SEND ADDRESSES) ("X" BOX FOR ATTACHMENT) ☐					
President Name EDWARD R. WALKER			Vice-President Name SAME		
Street Address 2352 MENDON ROAD			Street Address		
City CUMBERLAND	State RI	Zip 02864	City	State	Zip
Secretary Name SAME			Treasurer Name SAME		
Street Address			Street Address		
City	State	Zip	City	State	Zip
(SEND ADDRESSES) ("X" BOX FOR ATTACHMENT) ☐					
Director Name EDWARD R. WALKER			Director Name SAME		
Street Address 2352 MENDON ROAD			Street Address		
City CUMBERLAND	State RI	Zip 02864	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) ☐		
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	CNP	NPV

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CORPORATIONS DIV
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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.

Signature of Authorized Representative
EDWARD R. WALKER
Date
08/25/2015

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BY CN 255646