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(FAX) 401 942 0730

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State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Molis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2611
401.222.3011

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2016

Filing Period: January 1 - March 1 • Filing Fee: \$50.00* THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK
* In accordance with R.I.G.L. 7-1.2-1501(a), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 60267 2. Name of Corporation E. Raymond Interiors, Inc.

3. Street Address Principal Business Office 27 Oakdale Avenue City Johnston State RI Zip 02919

4. Business Phone No. (401) 454-4545 5. State of Incorporation Rhode Island

6. Brief Description of the Character of Business Conducted in Rhode Island
INTERIOR DESIGN CONSULTING

7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS

President Name Edward Raymond, Jr. Vice President Name Karen K. Bouthillette

Street Address 27 Oakdale Avenue Street Address 27 Oakdale Avenue

City Johnston State RI Zip 02919 City Johnston State RI Zip 02919

Secretary Name Edward Raymond, Jr. Treasurer Name Karen K. Bouthillette

Street Address 27 Oakdale Avenue Street Address 27 Oakdale Avenue

City Johnston State RI Zip 02919 City Johnston State RI Zip 02919

8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name Edward Raymond, Jr. Director Name Karen K. Bouthillette

Street Address 27 Oakdale Avenue Street Address 27 Oakdale Avenue

City Johnston State RI Zip 02919 City Johnston State RI Zip 02919

Director Name Director Name

Street Address Street Address

City City State State Zip Zip

9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) ☐

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
600	Common	No Par Value	200	Common	No Par Value

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

ISSUED SHARES — THIS SECTION MUST BE COMPLETED

Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
200	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.

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 Date 1/4/16

Edward Raymond, Jr.

Print or Type Name

President

Title

File Date: _____

Check No. _____

By: _____ BY

FOR SECRETARY OF STATE (USE ONLY)

FILED

JAN 06 2015

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