

## 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 2016

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 Event no	me of the Corporation			·-··	
•		2. Exact name of the Corporation  AVIE'S SKI/SPORTS, INC.				
114264	AVIES	SKI/SPOKIS, IN	<b>.</b>			
3. Principal office address 100 Main Street			City <b>Westerly</b>	State RI	Zip <b>02891</b>	
4. Business Phone No. <b>(401) 348-2034</b>			5. State of Incorporation Rhode Island			
		s conducted in Rhode Island		· · · · · · · · · · · · · · · · · · ·		
To engage in the b	usiness of selli	ng ski equipment an	d general sports e	quipment		
	<b>Maria Salawara</b>			A TOTAL CONTROL OF THE CONTROL OF TH		
President Name Theodore R. Avedesian			Vice-President Name Theodore R. Avedesian			
Street Address 5 Eddy Street			Street Address 5 Eddy Street			
City <b>Westerly</b>	State RI	Zip <b>02891</b>	City <b>Westerly</b>	State <b>RI</b>	Zip <b>02891</b>	
Secretary Name Theodore R. Avedesian			Treasurer Name Theodore R. Avedesian			
Street Address 5 Eddy Street			Street Address 5 Eddy Street			
City <b>Westerly</b>	State <b>RI</b>	Zip <b>02891</b>	City <b>Westerly</b>	State <b>RI</b>	Zip <b>02891</b>	
	(NAMES AND ADD	IRESSES) (*X* BOX FOR				
Director Name Theodore R. Avedesian			Director Name			
Street Address 5 Eddy Street			Street Address			
City <b>Westerly</b>	State RI	Zip <b>02891</b>	City	State	Zip	
Director Name			Director Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
SARARES AUTHORIZED (ACT)			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT)			
This information is assumed to the Office of			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	
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.		100	Common	None		
see section 5 of mistruction	on sileet.					
This report must be execu		corporation by an authorize			of a receiver or trustee,	
	tnis report mu	st be executed on behalf of	the corporation by the re	eceiver or trustee.		



Form No. 630 Revised: 01/2012 **FILED** 

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

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Theodore R. Avedesian

Print or Type Name of Authorized Representative