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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 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. **6676**	2. Exact name of the Corporation **National Velour Corporation**

3. Principal office address **61 John Street**	City **Johnston**	State **RI**	Zip **02919**
4. Business Phone No. **401-944-4990**	5. State of Incorporation **Rhode Island**		

6. Brief description of the character of business conducted in Rhode Island
flocking of foam plastic materials (Business ceased all operations as of September 30, 2015.)

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

President Name **Oscar DerManouelian**			Vice-President Name **Todd DerManouelian**		
Street Address **13 Dartmouth Avenue**			Street Address **8 Dartmouth Avenue**		
City **Warwick**	State **RI**	Zip **02888**	City **Warwick**	State **RI**	Zip **02888**
Secretary Name **Everett A. Marabian, Sr.**			Treasurer Name **Oscar DerManouelian**		
Street Address **20 Bentley Road**			Street Address **13 Dartmouth Avenue**		
City **Warwick**	State **RI**	Zip **02888**	City **Warwick**	State **RI**	Zip **02888**

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

Director Name **Everett A. Marabian, Sr.**			Director Name **Oscar DerManouelian**		
Street Address **20 Bentley Road**			Street Address **13 Dartmouth Avenue**		
City **Warwick**	State **RI**	Zip **02888**	City **Warwick**	State **RI**	Zip **02888**
Director Name **Americo Scungio**			Director Name **None**		
Street Address **91 Friendship Street**			Street Address		
City **Providence**	State **RI**	Zip **02903**	City	State	Zip

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
600	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] 2/9/16
Signature of Authorized Representative Date

Oscar DerManouelian
Print or Type Name of Authorized Representative

File Date ______________

Check No ______________

By: ______________

FEB 16 2016

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