



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

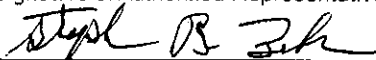
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Phone: (401) 222-3040 | Email: corporations@sos.ri.gov | Website: www.sos.ri.gov

RECEIVED
SECRETARY OF STATE
CORPORATIONS DIVISION
2016 MAY 19 PM 1:27

Profit Corporation Annual Report for the year: 2016

Filing period: January 1 - March 1

Filing Fee: \$50.00 *FAILURE TO FILE THIS REPORT BY MARCH 31 WILL RESULT IN A \$25.00 PENALTY PER DAY

1. Entity ID Number 2324		2. Exact name of the Corporation Berk's Stores, Inc.			
3. Principal Office Address 272 Thayer Street		City Providence	State RI	Zip 02906	
4. Business Phone Number 401.831.0174		5. State of Incorporation Rhode Island			
6. Brief description of the character of business conducted in Rhode Island Retail sale of men's and women's wear and shoes					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Stephen B. Berk			Vice-President Name Lauren A. Berk		
Street Address 272 Thayer Street			Street Address 12 Frederick Drive		
City Providence	State RI	Zip 02906	City Barrington	State RI	Zip 02806
Secretary Name Stephen B. Berk			Treasurer Name Stephen B. Berk		
Street Address 272 Thayer Street			Street Address 272 Thayer Street		
City Providence	State RI	Zip 02906	City Providence	State RI	Zip 02906
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Stephen B. Berk			Director Name		
Street Address 272 Thayer Street			Street Address		
City Providence	State RI	Zip 02906	City	State	Zip
9. Shares Authorized			10. Shares Issued Check box to indicate an attachment <input type="checkbox"/>		
This information is currently of record in the Department of State. Changes require an additional filing.			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
			127.5	A/Preferred	1,000.00
			721	B/Common	Without
11. 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.					
Name of Authorized Representative Stephen B. Berk				Date 5/19/16	
Signature of Authorized Representative 					

SIGN DOCUMENT HERE

FILED

MAY 19 2016

By 66 274725
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