



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. 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 No. 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) ("X" BOX FOR 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) ("X" BOX FOR 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
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
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
			127.5	A/Preferred	1,000.00
			85 721	A/Common B/Common	Without Without

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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.

FILED

File Date _____

Check No _____ **MAY 19 2016**

By: _____

FOR SECRETARY OF STATE **By ONLY 274725**

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.

Stephen B. Berk **3-8-16**
 Signature of Authorized Representative Date

Stephen B. Berk
 Print or Type Name of Authorized Representative

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