



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. 112409		2. Exact name of the Corporation The Fish Bowl Aquarium and Pets Mart, Co.			
3. Principal office address 4 Ursula Drive		City Bristol	State RI	Zip 02809	
4. Business Phone No. 401-822-0075		5. State of Incorporation Rhode Island			
6. Brief description of the character of business conducted in Rhode Island To operate and conduct an aquarium and pet store as well as pet supplies					
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name Michael A. Marabello, Sr.			Vice-President Name Michael A. Marabello, Jr.		
Street Address 4 Ursula Drive			Street Address 159 Lakeside Avenue		
City Bristol	State RI	Zip 02809	City Cranston	State RI	Zip 02920
Secretary Name Caitlin Marabello			Treasurer Name Lynn Marabello		
Street Address 159 Lakeside Avenue			Street Address 159 Lakeside Avenue		
City Cranston	State RI	Zip 02920	City Cranston	State RI	Zip 02920
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name Michael A. Marabello, Sr.			Director Name Michael A. Marabello, Jr.		
Street Address 4 Ursula Drive			Street Address 159 Lakeside Avenue		
City Bristol	State RI	Zip 02809	City Cranston	State RI	Zip 02920
Director Name Caitlin Marabello			Director Name Lynn Marabello		
Street Address 159 Lakeside Avenue			Street Address 159 Lakeside Avenue		
City Cranston	State RI	Zip 02920	City Cranston	State RI	Zip 02920
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
			3000	common	none

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.

File Date
Check No.
By
FOR SECRETARY OF STATE USE ONLY

Form No. 630
Revised: 01/2012

FILED
MAY 26 2016
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
Michael A. Marabello, Jr.
Date
5/18/16
Print or Type Name of Authorized Representative
A.A. 3:36pm