RI SOS Filing Number: 201602097490 Date: 07/15/2016 4:00 PM

2016 JUL 15 PM 2:32

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: 2016

Corporation

→ Filing period: January 1 - March 1
→ Filing Fee: $50.00
→ Penalty: Additional $25.00 fee if form is not filed by April 1.

1. Entity ID Number	2. Exact name of the Corporation		
108930	Black Sea, Inc.		
3. Principal Office Address	City	State	Zip
1155 North Main Street	Providence	RI	02904
4. Business Phone Number	5. State of Incorporation		
401-331-1133	Rhode Island		

6. Brief description of the character of business conducted in Rhode Island

To Conduct Loans, sales at retail, second hand and consignment

7. List ALL officers (names and addresses) — Check the box to indicate an attachment ☐

President Name	Vice-President Name
Florin Mihut	Florin Mihut
Street Address: 928 Admiral Street	Street Address: 928 Admiral Street
City: Providence State: RI Zip: 02904	City: Providence State: RI Zip: 02904
Secretary Name: Same As above	Treasurer Name: Same as above
Street Address	Street Address
City State Zip	City State Zip

8. List ALL directors (names and addresses) — Check the box to indicate an attachment ☐

Director Name	Director Name
Street Address	Street Address
City State Zip	City State Zip

9. Shares Authorized	10. Shares Issued — Check the box to indicate an attachment ☐		
	NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
This information is currently of record in the Department of State. **Changes require an additional filing.**	100	Common	No Par Value

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	Date
Florin Mihut	07.15.16
Signature of Authorized Representative	

FILED

JUL 15 2016

By: 279179

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

1998701-1136558

FORM 630 - Revised: 05/2016