RI SOS Filing Number: 201602621460 Date: 07/26/2016 4:00 PM

State of Rhode Island and Providence Plantations
Office of the Secretary of State

Fee: $50.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

Foreign Business Corporation
Annual Report 2015

Filing Period: January 1 - March 1

In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of $25.00.

ANNUAL REPORT YEAR: ~~2015~~ 2016

1. Corporate ID No. 000789488

2. Name of Corporation New Dawn Properties, Inc.

3. Street Address Principal Business Office:

No. and Street: 2 Connors Ln
City or Town: Riverside State: RI Zip: 02915 Country: USA

4. Business Phone No.

401-497-9142

5. State of Incorporation

State: NV

6. Brief Description of the Character of Business Conducted in Rhode Island

BUSINESS DEVELOPMENT

FILED
JUL 26 2016
BY 1437

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	KATHLEEN THOMAS	2 CONNORS LANE RIVERSIDE, RI 02915 USA
DIRECTOR	JONATHAN WALLACE THOMAS	2 CONNORS LANE RIVERSIDE, RI 02915 USA

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share		Total Issued and

			Total Authorized Shares *Number of Shares*	Outstanding *Num of Shares*
STK		$0.0000	75,000.00	31,450.00

9. 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.

Filer's Contact Information
(Enter a contact name, mailing address and email.)

Contact Name: Kathleen Thomas
Business Name: New Dawn Properties, Inc.
No. and Street: 2 Connors Ln
City or Town: Riverside State: RI Zip: 02915 Country: USA
Contact Phone: (401) 497-9141 ext:
Contact Email: Kathy02915@gmail.com

Please provide an email address to receive an expedited response from us if the filing is rejected for any reason. If no email address is provided, we will respond by mail.

Signed this 21 Day of July, 2016 at 3:30:16 PM. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By Kathleen Thomas
Signature of Authorized Representative of the Corporation

Kathleen Thomas, President

Make Corrections Accept

Form No. 630
Revised 09/07