



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

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2016

Filing Period: January 1 - March 1 • **Filing Fee:** \$50.00* • **THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.**

* 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.

1. Corporate ID No. 148702		2. Name of Corporation CRAN INDUSTRIES, INC.			
3. Street Address Principal Business Office 2845 POST ROAD, SUITE 307			City Warwick	State RI	Zip 02886
4. Business Phone No. 401-952-4546		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island wholesale and distributing of baked goods					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Barbara DeSantis Beer			Vice President Name Stephen P. Stafford		
Street Address 2845 Post Road, Suite 307			Street Address 2845 Post Road, Suite 307		
City Warwick	State RI	Zip 02886	City Warwick	State RI	Zip 02886
Secretary Name Stephen P. Stafford			Treasurer Name Barbara DeSantis Beer		
Street Address 2845 Post Road, Suite 307			Street Address 2845 Post Road, Suite 307		
City Warwick	State RI	Zip 02886	City Warwick	State RI	Zip 02886
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name NONE AT THIS TIME			Director Name		
Street Address			Street Address		
City	State	Zip	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"/>					
ISSUED SHARES — THIS SECTION MUST BE COMPLETED					
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
			200	Common	No Par

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

AUG 22 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.

By Barbara DeSantis Beer Signature Date 8/19/16
2016
LN
 Barbara DeSantis Beer
 Print or Type Name
 President
 Title

File Date _____
 Check No. _____
 By: _____
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