



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

Annual Report for the year: **2017**

Corporation

→ Filing period: January 1 - March 1

→ Filing Fee: \$50.00

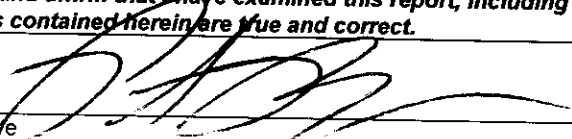
→ Penalty: Additional \$25.00 fee if form is not filed by April 1.

FILED

JAN 23 2017 **STAMP**

BY **B538**

FOR

1. Entity ID Number 2120		2. Exact name of the Corporation THE BAZAR GROUP, INC.			
3. Principal Office Address 793 Waterman Avenue		City East Providence		State RI	Zip 02914
4. Business Phone Number: 401-494-2595		6. Brief description of the character of business conducted in Rhode Island JOBBER AND MANUFACTURERS' REPRESENTATIVES; JEWELRY MANUFACTURER			
5. State of Incorporation RHODE ISLAND					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input checked="" type="checkbox"/>					
President Name Peter B. Bazar			Vice-President Name Beverly E. Bazar		
Street Address 793 Waterman Avenue			Street Address 793 Waterman Avenue		
City East Providence	State RI	Zip 02914	City East Providence	State RI	Zip 02914
Secretary Name Beverly E. Bazar			Treasurer Name Banice C. Bazar		
Street Address As above			Street Address 793 Waterman Avenue		
City	State	Zip	City East Providence	State RI	Zip 02914
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input checked="" type="checkbox"/>					
Director Name Banice C. Bazar, Chairman			Director Name Beverly E. Bazar		
Street Address As above			Street Address As above		
City	State	Zip	City	State	Zip
Director Name David N. Bazar			Director Name Peter B. Bazar		
Street Address 793 Waterman Avenue			Street Address As above		
City East Providence	State RI	Zip 02914	City	State	Zip
9. Shares Authorized This information is currently of record in the Department of State. Changes require an additional filing.			10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>		
			NUMBER OF SHARES CLASS/SERIES PAR VALUE		
			50 CLASS A VOTING		
			4950 CLASS B NON VOTING		
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 Peter B. Bazar			Date 1/19/17		
Signature of Authorized Representative 					
SIGN DOCUMENT HERE					

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

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2017

ATTACHMENT

THE BAZAR GROUP, INC.

7. Names and addresses of the Officers:

Vice President Name:

Jonathan Louttit
793 Waterman Avenue
East Providence, RI 02914

Assistant Secretary Name:

Sherry A. Goldin
10 Weybosset Street, 8th Fl.
Providence, RI 02903

8. Names and addresses of the Directors:

Karen Bergel
793 Waterman Avenue
East Providence, RI 02914