



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.

1. Entity ID Number 16070		2. Exact name of the Corporation Klitzner Industries, Inc.			
3. Principal Office Address 530 Wellington Avenue, Suite 11		City Cranston		State RI	Zip 02910
4. NAICS Code 31-33 - Manufacturing	6. Brief description of the character of business conducted in Rhode Island Emblematic jewelry manufacturer				
5. State of Incorporation Rhode Island					
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐					
President Name Alan J. Klitzner			Vice-President Name Dean Klitzner		
Street Address 530 Wellington Avenue, Suite 11			Street Address 530 Wellington Avenue, Suite 11		
City Cranston	State RI	Zip 02910	City Cranston	State RI	Zip 02910
Secretary Name Leta A. Klitzner			Treasurer Name Alfred C. Angelone		
Street Address 530 Wellington Avenue, Suite 11			Street Address 530 Wellington Avenue, Suite 11		
City Cranston	State RI	Zip 02910	City Cranston	State RI	Zip 02910
8. List ALL directors (names and addresses) Check the box to indicate an attachment ☐					
Director Name Alan J. Klitzner			Director Name Leta A. Klitzner		
Street Address 530 Wellington Avenue, Suite 11			Street Address 530 Wellington Avenue, Suite 11		
City Cranston	State RI	Zip 02910	City Cranston	State RI	Zip 02910
Director Name Dean Klitzner			Director Name		
Street Address 530 Wellington Avenue, Suite 11			Street Address		
City Cranston	State RI	Zip 02910	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 ☐		
			NUMBER OF SHARES CLASS/SERIES PAR VALUE		
			50	Class A Voting	Common no par
			500	Class B Non-Voting	Common no par
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 Alan J. Klitzner, President					Date 1-17-16
Signature of Authorized Representative 					

FILED

JAN 30 2017

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