



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

No Fee

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

**Business Corporation
Annual Report - Amended**

(Section 7-1.2-1501(e) of the General Laws of Rhode Island, 1956, as amended)

This form is only to be used to amend the current annual report on file with this office.

ANNUAL REPORT YEAR: 2017

1. Corporate ID No. 000017268

2. Name of Corporation WESTERLY BAKERY, INC.

3. Street Address Principal Business Office:

No. and Street: 30 BOILING SPRING AVE
City or Town: WESTERLY

State: RI Zip: 02891 Country: USA

4. Business Phone No.

401-596-5177

5. State of Incorporation

State: RI

ARTICLE III

Using the following NAICS codes, please select the code that best describes your business.

NAICS Code 42

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

INVESTMENT MANAGEMENT (BAKERY PREVIOUSLY)

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
TREASURER	DIANA LEE SIMONE	30 BOILING SPRING AVENUE WESTERLY, RI 02891 USA
SECRETARY	JOHN JAMES RIBEIRO	P.O. BOX 1907 TALLEVAST, FL 34270 USA

PRESIDENT	DIANA LEE SIMONE	30 BOILING SPRING AVENUE WESTERLY, RI 02891 USA
VICE PRESIDENT	JOHN JAMES RIBEIRO	314 BUENA VISTA AVE SARASOTA, FL 34243 USA
DIRECTOR	ANTHONY D RIBEIRO	1674 UNIVERSITY PKWY # 192 SARASOTA, FL 34243 USA
DIRECTOR	JOHN JAMES RIBEIRO	P.O. BOX 1907 TALLEVAST, FL 34270 USA

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares <i>Number of Shares</i>	Total Issued and Outstanding <i>Num of Shares</i>
CNP		\$0.0000	600.00	400

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.

Signed this 7 Day of March, 2017 at 5:31:47 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 J.J. RIBEIRO
Signature of Authorized Representative of the Corporation

Form No. 630
Revised 09/07

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State of Rhode Island and Providence Plantations
Department of State | Office of the Secretary of State
Nellie M. Gorbea, *Secretary of State*

I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island
and Providence Plantations, hereby certify that this document, duly executed in
accordance with the provisions of Title 7 of the General Laws of Rhode Island, as
amended, has been filed in this office on this day:

March 07, 2017 05:31 PM

The signature is written in a cursive, flowing style in blue ink. It appears to read "Nellie M. Gorbea".

Nellie M. Gorbea
Secretary of State

