



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year:
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 31725		2. Exact name of the Corporation Peter D. Pritsker, Inc.			
3. Principal Office Address 65 Hillside Road			City Cranston	State RI	Zip 02920
4. NAICS Code 44-45 - Retail Trade		6. Brief description of the character of business conducted in Rhode Island Retail jewelry store			
5. State of Incorporation Rhode Island					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Peter D. Pritsker			Vice-President Name		
Street Address 65 Hillside Road			Street Address		
City Cranston	State RI	Zip 02920	City	State	Zip
Secretary Name Marcia S. Pritsker			Treasurer Name Peter D. Pritsker		
Street Address 65 Hillside Road			Street Address 65 Hillside Road		
City Cranston	State RI	Zip 02920	City Cranston	State RI	Zip 02920
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Peter D. Pritsker			Director Name Marcia S. Pritsker		
Street Address 65 Hillside Road			Street Address 65 Hillside Road		
City Cranston	State RI	Zip 02920	City Cranston	State RI	Zip 02920
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	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
			100	Common/A	No Par
			900	Common/B	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 Peter D. Pritsker, President					Date 2/24/17
Signature of Authorized Representative <i>Peter D. Pritsker</i>					

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