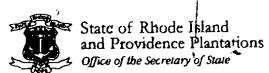
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A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street

Providence, RI 02904-2615 401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR _

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 refining to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(echd)) is

subject to a penalty fee of \$25.00.					
1. Corporate ID No. 17918 LORSESHOE FARMS INCORPORATED					
3. Street Address Principul Business O. 960 SHER	MAN FA	RM RD.	"HARRISVILLE	R.I.	"D2830
Cell (401)6514502 State of Incorporation R. #ODE ISLAND					
6. Brief Description of the Character of Business Conducted in Rhode Island HORSESHUEING 812990					
			CHMENT) [] FILL IN SPACES BEFORE USING ATTACHMENTS Vice President Name		
RALPH DIBATTISTA			SHIRLEY DIBATTISTA		
960 SHER	MAN FA	RM KD.	960 SHE	RMAN FAR	m Ro.
"HARRISVILLE	State R.I.	102830	PHARRISVILLE	R.I.	²⁴ 02830
SHIRLEY DIBATTISTA			RALPH DIBATTISTA		
SAME A	S ABOV	E	STORE A	S ADOVE	
City	State	7.sp	City (1)	State 11	210 V
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) [] FILL IN SPACES BEFORE USING ATTACHMENTS					
RALPH DIBATTISTA			SHIRLEY DIBATTISTA		
SAME AS ABOVE			960 SHERMAN FARM RD.		
City / (State 1	Z(p //	"HARRISVIII	State RIT.	02830
Director Name E			Director Name		
Siver Address			Street Address		
City	State	Z.lp	CHY	State	Zφ
9. SHARES AUTHORIZED NO PARVALUE A/			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
This is formation in ourself			Mumber of Shares	Class/Series	Par Value
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.			500 NO PAR VA	of A/1	NOPAR
				<u> </u>	
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					
		0.0 0010	Under penalty of perju	ry, I declare and affirm that	I have examined this report
		FEB 09 2018	including any accompa	inying schedules and statem	nents, and that all statement
File Dase	B,	4821	- fanh	O Bred	A 3 3/18
Check No			KALD	4 DiBA	-7/15TA
Ву:	·	_	Prini or Type Name	ゴーナー·	1. Chill
FOR SECRETARY OF ST	ATE USE ONLY		Tule	num He	1 Jay 1 1 8 Jul

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