



State of Rhode Island and Providence Plantations

## Department of State - Business Services Division

Annual Report for the year: **2018**  
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<br><b>000006341</b>  |                 | 2. Exact name of the Corporation<br><b>Dazzlin Enterprises, inc.</b>   |   |                                 |                     |                  |              |           |              |               |                     |  |  |  |
|--|-----------------|--|---|---------------------------------|---------------------|------------------|--------------|-----------|--------------|---------------|---------------------|--|--|--|
| 3. Principal Office Address<br><b>191 Ten Rod Road, P.O. Box 74</b>  |                 |  | City<br><b>Exeter</b>   | State<br><b>RI</b>              | Zip<br><b>02822</b> |                  |              |           |              |               |                     |  |  |  |
| 4. NAICS Code<br><b>453920</b>   |                 | 6. Brief description of the character of business conducted in Rhode Island<br><b>Dealer in Art, Antiques and Rarities</b> |   |                                 |                     |                  |              |           |              |               |                     |  |  |  |
| 5. State of Incorporation<br><b>Rhode Island</b>   |                 |  |   |                                 |                     |                  |              |           |              |               |                     |  |  |  |
| 7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>   |                 |  |   |                                 |                     |                  |              |           |              |               |                     |  |  |  |
| President Name <b>Scott Gordon</b>   |                 |  | Vice-President Name <b>Ruth Gordon</b>  |                                 |                     |                  |              |           |              |               |                     |  |  |  |
| Street Address <b>191 Ten Rod Road, P.O. Box 74</b>  |                 |  | Street Address <b>191 Ten Rod Road, P.O. Box 74</b>   |                                 |                     |                  |              |           |              |               |                     |  |  |  |
| City <b>Exeter</b>   | State <b>RI</b> | Zip <b>02822</b>   | City <b>Exeter</b>  | State <b>RI</b>                 | Zip <b>02822</b>    |                  |              |           |              |               |                     |  |  |  |
| Secretary Name <b>Ruth Gordon</b>  |                 |  | Treasurer Name <b>Scott Gordon</b>  |                                 |                     |                  |              |           |              |               |                     |  |  |  |
| Street Address <b>191 Ten Rod Road, P.O. Box 74</b>  |                 |  | Street Address <b>191 Ten Rod Road, P.O. Box 74</b>   |                                 |                     |                  |              |           |              |               |                     |  |  |  |
| City <b>Exeter</b>   | State <b>RI</b> | Zip <b>02822</b>   | City <b>Exeter</b>  | State <b>RI</b>                 | Zip <b>02822</b>    |                  |              |           |              |               |                     |  |  |  |
| 8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>  |                 |  |   |                                 |                     |                  |              |           |              |               |                     |  |  |  |
| Director Name  |                 |  | Director Name   |                                 |                     |                  |              |           |              |               |                     |  |  |  |
| Street Address   |                 |  | Street Address  |                                 |                     |                  |              |           |              |               |                     |  |  |  |
| City   | State           | Zip  | City  | State                           | Zip                 |                  |              |           |              |               |                     |  |  |  |
| Director Name  |                 |  | Director Name   |                                 |                     |                  |              |           |              |               |                     |  |  |  |
| Street Address   |                 |  | Street Address  |                                 |                     |                  |              |           |              |               |                     |  |  |  |
| City   | State           | Zip  | City  | State                           | Zip                 |                  |              |           |              |               |                     |  |  |  |
| 9. Shares Authorized   |                 |  | 10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>   |                                 |                     |                  |              |           |              |               |                     |  |  |  |
| This information is currently of record in the Department of State.<br><br>Changes require an additional filing.   |                 |  | <table border="1"> <thead> <tr> <th>NUMBER OF SHARES</th> <th>CLASS/SERIES</th> <th>PAR VALUE</th> </tr> </thead> <tbody> <tr> <td><b>1,000</b></td> <td><b>Common</b></td> <td><b>No Par Value</b></td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table> |                                 |                     | NUMBER OF SHARES | CLASS/SERIES | PAR VALUE | <b>1,000</b> | <b>Common</b> | <b>No Par Value</b> |  |  |  |
|  |                 |  | NUMBER OF SHARES  | CLASS/SERIES                    | PAR VALUE           |                  |              |           |              |               |                     |  |  |  |
| <b>1,000</b>   | <b>Common</b>   | <b>No Par Value</b>  |   |                                 |                     |                  |              |           |              |               |                     |  |  |  |
|  |                 |  |   |                                 |                     |                  |              |           |              |               |                     |  |  |  |
|  |                 |  |   |                                 |                     |                  |              |           |              |               |                     |  |  |  |
| 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.<br><b>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.</b> |                 |  |   |                                 |                     |                  |              |           |              |               |                     |  |  |  |
| Name of Authorized Representative<br><b>Scott Goordon</b>  |                 |  |   | Date<br><b>2/27/18</b>          |                     |                  |              |           |              |               |                     |  |  |  |
| Signature of Authorized Representative<br><i>Scott Goordon</i>   |                 |  |   | SIGN DOCUMENT HERE <b>FILED</b> |                     |                  |              |           |              |               |                     |  |  |  |

MAIL TO:  
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BY **1245DS**