



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 <b>15457</b>		2. Exact name of the Corporation <b>Waliga Imports &amp; Sales, Inc.</b>			
3. Principal Office Address <b>1467 Atwood Avenue</b>			City <b>Johnston</b>	State <b>RI</b>	Zip <b>02919</b>
4. NAICS Code <b>423940</b>		6. Brief description of the character of business conducted in Rhode Island <b>Importing and sales of imitation and semi-precious stones, chains and findings.</b>			
5. State of Incorporation <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>Michele L. Aubin</b>			Vice-President Name <b>Sherri Ann Cantara</b>		
Street Address <b>1467 Atwood Avenue</b>			Street Address <b>1467 Atwood Avenue</b>		
City <b>Johnston</b>	State <b>RI</b>	Zip <b>02919</b>	City <b>Johnston</b>	State <b>RI</b>	Zip <b>02919</b>
Secretary Name <b>Michele L. Aubin</b>			Treasurer Name <b>Sherri Ann Cantara</b>		
Street Address <b>1467 Atwood Avenue</b>			Street Address <b>1467 Atwood Avenue</b>		
City <b>Johnston</b>	State <b>RI</b>	Zip <b>02919</b>	City <b>Johnston</b>	State <b>RI</b>	Zip <b>02919</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 <b>Barbara L. Waliga</b>			Director Name <b>Sherri Ann Cantara</b>		
Street Address <b>1467 Atwood Avenue</b>			Street Address <b>1467 Atwood Avenue</b>		
City <b>Johnston</b>	State <b>RI</b>	Zip <b>02919</b>	City <b>Johnston</b>	State <b>RI</b>	Zip <b>02919</b>
Director Name <b>Michele L. Aubin</b>			Director Name		
Street Address <b>1467 Atwood Avenue</b>			Street Address		
City <b>Johnston</b>	State <b>RI</b>	Zip <b>02919</b>	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.  Changes require an additional filing.			NUMBER OF SHARES		
			CLASSIER ES		
			PAR VALUE		
			Common		
			No Par Value		
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. <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 <b>Michele L. Aubin</b>					Date <b>3/1/18</b>
Signature of Authorized Representative <i>Michele L. Aubin</i>					SIGN DOCUMENT HERE <b>FILED</b> <i>02</i>

## MAIL TO:

Division of Business Services

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Website: www.sos.ri.gov

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