

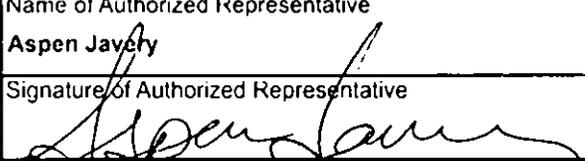


State of Rhode Island and Providence Plantations
Department of State - Business Services Division

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.

RECEIVED
 SECRETARY OF STATE
 CORPORATIONS DIV.
 2019 APR -8 AM 11:44

1. Entity ID Number 001676592		2. Exact name of the Corporation R & R Distribution, Inc			
3. Principal Office Address 212 Columbia Street			City Wakefield	State RI	Zip 02879
4. NAICS Code 492210		6. Brief description of the character of business conducted in Rhode Island Distribute/Deliver Newspapers and any other lawful purpose.			
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 Ramsey B. Reels			Vice-President Name Aspen Javery		
Street Address 136 Whitehall Street			Street Address 212 Columbia Street		
City Providence	State RI	Zip 02909	City Wakefield	State RI	Zip 02879
Secretary Name None			Treasurer Name None		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name None			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 Check the box to indicate an attachment <input type="checkbox"/>					
This information is currently of record in the Department of State. Changes require an additional filing.		NUMBER OF SHARES		CLASS-SERIES	PAR VALUE
		100		Common	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 Aspen Javery					Date
Signature of Authorized Representative 					

MAIL TO:
 Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2616
 Phone: (401) 222-3040
 Website: www.sos.ri.gov

SIGN DOCUMENT HERE
FILED

APR 08 2019
 BY MBCJSD
 A.A. 11:45 A.M.