



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

**Annual Report for the year: 2014**  
**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>000792615</b>		2. Exact name of the Corporation <b>Insatiable Press Limited</b>			
3. Principal Office Address <b>42 Whitecap Drive</b>			City <b>North Kingstown</b>	State <b>RI</b>	Zip <b>02852</b>
4. NAICS Code <b>511130</b>		6. Brief description of the character of business conducted in Rhode Island <b>Creation and distribution of audiobooks.</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>Michael Desrosiers</b>			Vice-President Name <b>Michele Cobb</b>		
Street Address <b>304 Cedar Trail Lane</b>			Street Address <b>47 Roanoke St</b>		
City <b>Apex</b>	State <b>NC</b>	Zip <b>27502</b>	City <b>Providence</b>	State <b>RI</b>	Zip <b>02908</b>
Secretary Name <b>Michele Cobb</b>			Treasurer Name <b>Michael Desrosiers</b>		
Street Address <b>47 Roanoke St</b>			Street Address <b>304 Cedar Trail Lane</b>		
City <b>Providence</b>	State <b>RI</b>	Zip <b>02908</b>	City <b>Apex</b>	State <b>NC</b>	Zip <b>27502</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>Michael Desrosiers</b>			Director Name <b>Michele Cobb</b>		
Street Address <b>304 Cedar Trail Lane</b>			Street Address <b>47 Roanoke St</b>		
City <b>Apex</b>	State <b>NC</b>	Zip <b>27502</b>	City <b>Providence</b>	State <b>RI</b>	Zip <b>02908</b>
Director Name <b>Robert Podrasky</b>			Director Name		
Street Address <b>1901 N. Andrews Ave #122</b>			Street Address		
City <b>Wilton Manors</b>	State <b>FL</b>	Zip <b>33311</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		CLASS/SERIES	PAR VALUE
		<b>100</b>		<b>Common</b>	<b>.01</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. <i>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.</i>					
Name of Authorized Representative <b>Michael J Desrosiers</b>					Date <b>6-13-2019</b>
Signature of Authorized Representative <i>Michael J Desrosiers</i>					<b>FILED</b> JUN 27 2019 BY <i>9 WMKV</i> A.A. 10:51 A.M.
SIGN DOCUMENT HERE					

MAIL TO:  
 Division of Business Services  
 148 W. River Street, Providence, Rhode Island 02904-2615  
 Phone: (401) 222-3040  
 Website: www.sos.ri.gov