

Matthew A. Brown, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401.222.3040

Form 630 12/01

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

Filing Period: January 1 - March 1 ● Filing Fee: \$50.00 (FORM MUST BE TYPED IN BLACK) 1. Corporate ID No. 2. Name of Corporation 120048 B & P JEWELRY, INC. 3. Street Address Principal Business Office City State 934 BROAD STREET PROVIDENCE RI 02907-4. Business Phone No. 5. State of Incorporation 6. SIC Code 401-941-0203 RHODE ISLAND 3954 7. Brief Description of the Character of Business Conducted in Rhode Island TO OPERATE A JEWELRY STORE. BUYING AND SELLING JEWELRY AND WATCHES AT RETAIL AND WHOLESALE. 8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) THE HILL IN SPACES BEFORE USING ATTACHMENTS President Name Vice President Name Pedro Feliz Brenda L. Reyes Street Address Street Address 103 Wollaston Street 103 Wollaston Street State 7.p City State Zip City Cranston RI 02910 Cranston 02910 Secretary Name Treasurer Name Brenda L. Reyes Brenda L. Reyes Street Address Street Address 103 Wollaston Street 103 Wollaston Street City State Zπ City Zip Cranston RI 02910 Cranston RI 02910 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) [] FILL IN SPACES BEFORE USING ATTACHMENTS Director Name Director Name Brenda L. Reyes Pedro Feliz Street Address Street Address 103 Wollaston Street 103 Wollaston Street City State Zip State City Zip Cranston RI 02910 Cranston RI 02910 Director Name Director Name Street Address Street Address ZID 210 State 16: SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) [IL SHARES ISSUED CX BOX FOR ATTACHMENT) AUTHORIZED SHARES ISSUED SHARES Number of Shares Number of Shares Class/Series Par Value Class/Series 1,000 NO PAR VALUE 1,000 Common No Par This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, 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. *120048 DBC 01/18/05 12:48:03 PM* Signature of Off Pedro Feliz Print or Type Name of Officer President FOR SECRETARY OF STATE USE ONLY

Title of Officer



Filing Period: Janua FORM MUST BE TYPE	ry I - March I 💌	Filing Fee: \$50.00	PORT FOR THE				
I. Corporate ID No. 120048	2. Name of Cor B & P Jew						
3. Street Address Principa	d Business Office	•	City	State	Zip		
934 Broad Street			Providence	RI	02907		
4. Business Phone No.		5. State of Incorporati	tion		6. SIC Code		
401-941-0203 Rhode Island				3954			
7. Brief Description of the Operate a jewel	Choracter of Business (Conducted in Rhode Island and sell jewelry an	nd watches at retail a	and wholesale. Re	pair jewelry		
8. NAMES AND ADE President Name	PRESSES OF THE O	FFICERS ("X" BOX FOR	ATTACHMENT) FILL IN SP Vice President Name	ACES BEFORE USING AT	TTACHMENTS		
Pedro Feliz			Brenda L. Reyes	3			
Sircet Address			Street Address		*		
103 Wollaston Street			103 Wollaston S	Street			
City	State	Zip	City	State	Zip		
Cranston	RI	02910	Cranston	RI	02910		
ecretary Name			Treasurer Name				
Brenda L. Reye	8		Brenda L. Reyes				
Sirret Address			Street Address				
103 Wollaston Street			103 Wollaston Street				
City	State	Zip	City	State	Zip		
Cranston	RI	02910	Cranston	RI	02910		
9. NAMES AND ADI Director Name	DRESSES OF THE D	IRECTORS ("X" BOX FO	RATTACHMENT) FILL IN : Director Name	SPACES BEFORE USING	ATTACHMENTS		
Brenda L. Reyes			Pedro Feliz				
Street Address			Street Address	•	-		
103 Wollaston	Street		103 Wollaston S	Street			
City	State	Zip	City	State	Źip		
Cranston	RI	02910	Cranston	RI	02910		
Director Name			Director Name		• •		
Street Address			Street Address	. .			
City	State	Zip	City	State	Zip		
10. SHARES AUTHO		OR ATTACHMENT)		(" BOX FOR ATTACHMEN	m 🗆		
AUTHORIZED SHARES Number of Shares	Class/Series	Par Value	ISSUED SHARES Number of Shares	Class/Series	Par Value		
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This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

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File Date	1.50.01	
Check No.	3698	
By:	10	
	ARY OF STATE USE ONLY	_

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.

Signature of Officer Date

Date

Pedro Feliz

Print or Type Name of Officer

President

Form 630 12/01



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State

Matthew A. Brown, Secretary of State Corporations Division 100 North Main Street, Providence, Rt 02903-1335 401.222.3940

Form 630 12/0:

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003

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120048		ELRY, INC.			
3. Street Address Principal Busi 934 BROAD ST.	ness Office		City	State	Zip
4 Business Phone No.	*****************************		PROVIDENCE	RI	02907-
4 Business Phone No. 5. State of Incorporation (401) 941-0203 RHODE ISLAND					6. SIC Code
	motor of Bullions C			وراي روورزدروورددددددددددد	3954
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JEWELRY. 8. NAMES AND ADDRESS	KTS AT TUT AT	TICTOS AND BAVEN	1 ATTACHMENT) □ FILL LAS		
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Brenda L. Reyes			Brenda L. Reye	s	
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Cuy	State	Ζιρ	City	State	Žip
Cranston Sećrejary Name	RI	02910	Cranston	RI	02910
Brenda L. Reyes			Treasurer Name	_	
Street Address	***************************************		Brenda L. Reye	5	***************************************
103 Wollaston Str	eet		Street Address	Stroot	
City	State	Zin	103 Wollaston		
Cranston	RI	<i>∑ip</i> ○02910	Cuy .Cranston	:State RI	Zip
S. NAMES AND ADDRES			OK APTACHMENT) [] FILL IN		۔.02910 ے
Director Name			Director Name	SPACES BEFUKE USING	ALEKCHOLLNIS
Brenda L. Reyes			,		ு திறிக்
Street Address	entrono accesada acamento acamento, co		Street Address		<u> </u>
103 Wollaston Stre	eet				5
City	State	Zip	Citv	Siale	ST 10 -A
Cranston	RI	02910	V.		3000
Director Name			Director Name	*****	
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Street Address	eriya diga derikeringaniyan ga		Street Address		And the second s
240.000 · · · · · · · · · · · · · · · · ·					
City	State	Zıp	City	State	Ζιρ
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Number of Shares	Class/Series	Par Value	ISSUED SHARES Number of Shares	Class/Series	Dar Val
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1,000 NO PAR VALUE			1,000	Common	No Par

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his report must he sione	d in ink hy aith	or the Procident Via	e President, Secretary, Assi		
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	 	11			
					15
* 1 2	0 0 4 8	ញែ ប្រធាន	Under penalty of pe	rjury, I declare and affirm	that I have examined
			this report, including	g any accompanying sche	dules and statements.
*120048 DBC6/24/031	1:50:32-AM	- 1. · · · · · · · · · · · · · · · · · ·	and that all statemen	nts contained herein are tro	ue and correct.
File Date	_ [_ [_		Brence	W for Red	•
1411 - 1	ን ይ ኃስሰኃ	""##(## # #	Signature of Officer	5- pa 1 - 18	<u>Date</u>
Check No. JUL) 8 2003	_ 03/4303	Brenda L. R	,	
		•	, , _ , _ , _ , _ ,	-,	
. p., M	111100 ~.	M	Print or Type Name of	Officer	
By W	11108 Ca	A	Print or Type Name of President	Officer	<u> </u>

Edward S. Inman, III, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002

iling	Period:	January	1-March 1	•	Filing	Fec:	\$50.00
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(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.

2. Name of Corporation

120048

B & P Jewelry Inc

3. Street Address Principal Business Office 934 Broad Street

State

RI

4. Business Phone No.

5. State of Incorporation

6. SIC Code

(401) 941-0203

Rhode Island

City

3954

02907

7. Brief Description of the Character of Business Conducted in Rhode Island

Operate Jewelry Store

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Vice President Name

President Name

Brenda L. Reyes

Street Address

Secretary Name

934 Broad Street

Providence

RI

02907

934 Broad Street

Brenda L. Reyes

Providence

RI

Providence Treasurer Name

Street Address

Street Address

Street Address

City

Brenda L. Reyes

Street Address

934 Broad Street

934 Broad Street

Brenda L. Reyes

Providence

RΙ

02907

Providence

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02907

02907

9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Director Name

Director Name

Brenda L. Reyes

Street Address 934 Broad Street

City

Providence

RI

State

02907

City

State

Zip

Director Name Director Name

Street Address

City

State

City

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10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES Number of Shares

Class/Series

Par Value

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Street Addiess

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

Par Value

1000

Common

No Par

Number of Shares 1000

Class/Series Common

No Par

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

8.26.02 FOR SECRETARY OF STATE USE ONLY

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.

Brenda L. Reyes Print or Type Name of Officer

President

Title of Officer <**☼>** 5

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