



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

Annual Report for the year: 2020
Corporation

→ Filing period: January 1 - March 1

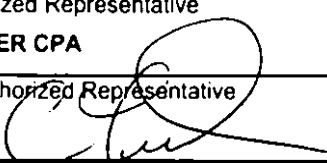
* → Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by April 1.

FILED

FEB 24 2020

1617

1. Entity ID Number 001682436		2. Exact name of the Corporation FIRST LOVE FILMS			
3. Principal Office Address 1990 SOUTH BUNDY DRIVE, SUITE 200			City LOS ANGELES	State CA	Zip 90025
4. NAICS Code 711510		6. Brief description of the character of business conducted in Rhode Island ENTERTAINMENT			
5. State of Incorporation CA					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name EMMA KOSKOFF			Vice-President Name EMMA KOSKOFF		
Street Address 1990 S BUNDY DRIVE #200			Street Address 1990 S BUNDY DRIVE #200		
City LOS ANGELES	State CA	Zip 90025	City LOS ANGELES	State CA	Zip 90025
Secretary Name EMMA KOSKOFF			Treasurer Name EMMA KOSKOFF		
Street Address 1990 S BUNDY DRIVE #200			Street Address 1990 S BUNDY DRIVE #200		
City LOS ANGELES	State CA	Zip 90025	City LOS ANGELES	State CA	Zip 90025
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name EMMA KOSKOFF			Director Name		
Street Address 1990 S BUNDY DRIVE #200			Street Address		
City LOS ANGELES	State CA	Zip 90025	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized			10. Shares Issued 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/STRIKES		
			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. <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 CRAIG TESSLER CPA					Date
Signature of Authorized Representative 					SIGN DOCUMENT HERE