



**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. 114063		2. Name of Corporation Rebecchi Web Ventures Incorporated			
3. Street Address Principal Business Office 13 SAIL STREET			City JAMESTOWN	State RI	Zip 02835-
4. Business Phone No. 4014239700		5. State of Incorporation RHODE ISLAND			6. SIC Code 4630
7. Brief Description of the Character of Business Conducted in Rhode Island INTERNET RELATED ENTERPRISES, INCLUDING WEB INFORMATION SERVICES, ADVERTISING, PROMOTION AND WEBSITE DEVELOPMENT					
8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Saverio Rebecchi			Vice President Name		
Street Address 13 Sail Street			Street Address		
City Jamestown	State RI	Zip 02835	City	State	Zip
Secretary Name Saverio Rebecchi			Treasurer Name Saverio Rebecchi		
Street Address 13 Sail Street			Street Address 13 Sail Street		
City Jamestown	State RI	Zip 02835	City Jamestown	State RI	Zip 02835
9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Saverio Rebecchi			Director Name		
Street Address 13 Sail Street			Street Address		
City Jamestown	State RI	Zip 02835	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED. ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
8,000	\$.001 PAR VALUE		1,000	common	\$.001 par

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



1 1 4 0 6 3

\*114063 DBC 02/25/05 03:04:40 PM\*

File Date 3/22/05

Check No. 1261

By: W.

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.

Saverio Rebecchi 2/27/05  
Signature of Officer Date  
**Saverio Rebecchi**  
Print or Type Name of Officer  
**President**  
Title of Officer



# PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

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(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 114063		2. Name of Corporation Thanks Depot Corporation			
3. Street Address Principal Business Office 13 SAIL STREET			City JAMESTOWN	State RI	Zip 02835-
4. Business Phone No. (401) 423-9700		5. State of Incorporation RHODE ISLAND			6. SIC Code 4630
7. Brief Description of the Character of Business Conducted in Rhode Island TO MARKET, DISTIRBUTE AND SELL APPRECIATION AND GIFT ITEMS THROUGH TRADITIONAL RETAIL AFFILIATES AS WELL AS ON THE WORLD WIDE WEB.					
8. NAMES AND ADDRESSES OF THE OFFICERS ( <input checked="" type="checkbox"/> BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Saverio Rebecchi			Vice President Name None		
Street Address 13 Sail Street			Street Address		
City Jamestown	State RI	Zip 02835	City	State	Zip
Secretary Name Saverio Rebecchi			Treasurer Name Saverio Rebecchi		
Street Address 13 Sail Street			Street Address 13 Sail Street		
City Jamestown	State RI	Zip 02835	City Jamestown	State RI	Zip 02835
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Director Name Saverio Rebecchi			Director Name		
Street Address 13 Sail Street			Street Address		
City Jamestown	State RI	Zip 02835	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
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Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
8,000	\$ .001 PAR VALUE		1,000	Common	\$ .001

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



1 1 4 0 6 3

\*114063 DBC 01/05/04 11:07:29 AM\*  
**FILED**  
 File Date \_\_\_\_\_  
 Check No. JAN 29 2004  
 By: By M18164  
 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.

Saverio Rebecchi - 1/22/04  
 Signature of Officer Date  
 Saverio Rebecchi  
 Print or Type Name of Officer  
 President  
 Title of Officer



# PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003

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(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. *114063*		2. Name of Corporation Thanks Depot Corporation			
3. Street Address Principal Business Office 13 SAIL STREET			City JAMESTOWN	State RI	Zip 02835-
4. Business Phone No. 4014239700		5. State of Incorporation RHODE ISLAND		6. SIC Code 4630	
7. Brief Description of the Character of Business Conducted in Rhode Island TO MARKET, DISTRIBUTE AND SELL APPRECIATION AND GIFT ITEMS THROUGH TRADITIONAL RETAIL AFFILIATES AS WELL AS ON THE WORLD WIDE WEB					
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Street Address 13 Sail Street			Street Address		
City Jamestown	State RI	Zip 02835	City	State	Zip
Secretary Name Saverio Rebecchi			Treasurer Name Saverio Rebecchi		
Street Address 13 Sail Street			Street Address 13 Sail Street		
City Jamestown	State RI	Zip 02835	City Jamestown	State RI	Zip 02835
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Street Address 13 Sail Street			Street Address		
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Director Name			Director Name		
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AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
8,000	\$.001 PAR VALUE		1,000	Common	.001

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



\* 1 1 4 0 6 3 \*

\*\*114063\* 1/14/03 6:28:46 PM\*

File Date 2/12/03

Check No. 1125

By: [Signature]

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.

[Signature] 2/12/03  
Signature of Officer Date  
Saverio Rebecchi  
Print or Type Name of Officer  
President  
Title of Officer



**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002**

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **114063** 2. Name of Corporation **Thanks Depot Corporation**  
3. Street Address Principal Business Office **13 Sail Street** City **Jamestown** State **RI** Zip **02835**  
4. Business Phone No **9700** (401) 423-2981 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **4630**

7. Brief Description of the Character of Business Conducted in Rhode Island  
**To market, distribute, and sell appreciation and gift items.**

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

President Name <b>Saverio Rebecchi</b>	Vice President Name
Street Address <b>13 Sail Street</b>	Street Address
City State Zip <b>Jamestown RI 02835</b>	City State Zip
Secretary Name <b>Saverio Rebecchi</b>	Treasurer Name <b>Saverio Rebecchi</b>
Street Address <b>13 Sail Street</b>	Street Address <b>13 Sail Street</b>
City State Zip <b>Jamestown RI 02835</b>	City State Zip <b>Jamestown RI 02835</b>

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

Director Name <b>Saverio Rebecchi</b>	Director Name
Street Address <b>13 Sail Street</b>	Street Address
City State Zip <b>Jamestown RI 02835</b>	City State Zip
Director Name	Director Name
Street Address	Street Address
City State Zip	City State Zip

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

AUTHORIZED SHARES	Class/Series	Par Value
<b>8,000 \$ .001 PAR VALUE</b>		

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

ISSUED SHARES	Class/Series	Par Value
<b>1,000</b>	<b>Common</b>	<b>.001 Par Value</b>

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



\* 1 1 4 0 6 3 \*

File Date: 1-24-02  
Check No.: 1053  
By: AMF

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.

Saverio Rebecchi Pres. 1/15/02  
Signature of Officer Date  
Saverio Rebecchi  
Print or Type Name of Officer  
President  
Title of Officer



**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001**  
Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **114063** 2. Name of Corporation **Thanks Depot Corporation**  
3. Street Address Principal Business Office **13 Sail Street** City **Jamestown** State **RI** Zip **02835**  
4. Business Phone No. **(401) 423-2981** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **4630**  
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Street Address <b>13 Sail Street</b>	Street Address
City State Zip <b>Jamestown RI 02835</b>	City State Zip
Secretary Name <b>Saverio Rebecchi</b>	Treasurer Name <b>Saverio Rebecchi</b>
Street Address <b>13 Sail Street</b>	Street Address <b>13 Sail Street</b>
City State Zip <b>Jamestown RI 02835</b>	City State Zip <b>Jamestown RI 02835</b>

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

Director Name <b>Saverio Rebecchi</b>	Director Name
Street Address <b>13 Sail Street</b>	Street Address
City State Zip <b>Jamestown RI 02835</b>	City State Zip
Director Name	Director Name
Street Address	Street Address
City State Zip	City State Zip

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

AUTHORIZED SHARES	Class/Series	Par Value
<b>8,000</b>	<b>\$.001</b>	<b>PAR VALUE</b>

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

ISSUED SHARES	Class/Series	Par Value
<b>1,000</b>	<b>Common</b>	<b>.001 Par Value</b>

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



\* 1 1 4 0 6 3 \*

File Date 1/23/2001

Check No. 1002

By: [Signature]

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

[Signature] 1/11/01  
Signature of Officer Date

Saverio Rebecchi  
Print or Type Name of Officer

President  
Title of Officer