Matthew A. Brown, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401 222 3040

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

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*		
61676	JJI International, Inc.		
3 Street Address Principal Business Office	*City*	*State*	*Zip*
20 ALTIERI WAY	WARWICK	RI	02886
4 Business Phone No	*5 State of Incorporation*		*6 SIC Code*
4017328668	RHODE ISLAND		1883

7 Brief Description of the Character of Business Conducted in Rhode Island
DESIGN, MANUFACTURE, DISTRIBUTE JEWELRY GIFTS AND ASSOCIATED PRODUCTS

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

President Name			*Vice President Name*		
Lisa Weingeroff			R. Dale Kincaid		
Street Address			*Street Address*		
20 ALTIERI WAY			20 ALTIERI WAY		
City	*State*	*Zip*	*City*	*State*	*Zip*
WARWICK	RI	02886	WARWICK	RI	02886
Secretary Name			*Treasurer Name*		
R. Dale Kincaid			Lisa Weingeroff		
Street Address			*Street Address*		
20 ALTIERI WAY			20 ALTIERI WAY		
City	*State*	*Zip*	*City*	*State*	*Zip*
WARWICK	RI	02886	WARWICK	RI	02886

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

Director Name			*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*

10. SHARES AUTHORIZED *("X" BOX FOR ATTACHMENT)* ☐ **11. SHARES ISSUED** *("X" BOX FOR ATTACHMENT)* ☐

AUTHORIZED SHARES *Number of Shares*	*Class/Series*	*Par Value*	ISSUED SHARES *Number of Shares*	*Class/Series*	*Par Value*
1.000 NO PAR VALUE			200	Common	No Par

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

[redacted] 61676 [redacted]

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.

By: [signature] 1-19-05, President
Signature of Officer *Date*

Lisa Weingeroff
Printed/Type Name of Officer

[redacted] President
Title of Officer

Form 630 12/01

File Date 2/1/05
Check No 021403
By M.
FOR SECRETARY OF STATE USE ONLY

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

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 2004

Filing Period: January 1 - March 1 ● Filing Fee: $50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.	2. Name of Corporation			
61676	JJI International, Inc.			
3. Street Address Principal Business Office		City	State	Zip
20 ALTIERI WAY		WARWICK	RI	02886
4. Business Phone No.	5. State of Incorporation			6. SIC Code
4017328668	RHODE ISLAND			1883

7. Brief Description of the Character of Business Conducted in Rhode Island
DESIGN, MANUFACTURE, DISTRIBUTE JEWELRY GIFTS AND ASSOCIATED PRODUCTS

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

President Name			Vice President Name		
Lisa Weingeroff			R. Dale Kincaid		
Street Address			Street Address		
20 ALTIERI WAY			20 ALTIERI WAY		
City	State	Zip	City	State	Zip
WARWICK	RI	02886	WARWICK	RI	02886
Secretary Name			Treasurer Name		
R. Dale Kincaid			Lisa Weingeroff		
Street Address			Street Address		
20 ALTIERI WAY			20 ALTIERI WAY		
City	State	Zip	City	State	Zip
WARWICK	RI	02886	WARWICK	RI	02886

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

Director Name			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

10. SHARES AUTHORIZED (X BOX FOR ATTACHMENT) ☐ **11. SHARES ISSUED** (X BOX FOR ATTACHMENT) ☐

AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1,000 NO PAR VALUE			200	Common	No Par

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

[redacted] *61676*

61676 DBC1/21/04 3:05 PM
File Date FEB 05 2004
Check No. 19037
By [signature]
FOR SECRETARY OF STATE USE ONLY

[redacted]

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] 1-20-04
Signature of Officer *Date*

Lisa Weingeroff
Print or Type Name of Officer

[redacted] President
Title of Officer

Form 630 12/01

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

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 2003

Filing Period: January 1 - March 1 ● Filing Fee: $50.00

(FORM MUST BE TYPED IN BLACK)

1 Corporate ID No	2 Name of Corporation
61676	JJI International, Inc.

3 Street Address Principal Business Office	City	State	Zip
20 ALTIERI WAY	WARWICK	RI	02886

4 Business Phone No.	5 State of Incorporation	6 SIC Code
4017328668	RHODE ISLAND	3883

7 Brief Description of the Character of Business Conducted in Rhode Island
DESIGN, MANUFACTURE, DISTRIBUTE JEWELRY GIFTS AND ASSOCIATED PRODUCTS

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

President Name	Street Address	City	State	Zip
Lisa Weingeroff	20 ALTIERI WAY	WARWICK	RI	02886

Vice President Name	Street Address	City	State	Zip
R. Dale Kincaid	20 ALTIERI WAY	WARWICK	RI	02886

Secretary Name	Street Address	City	State	Zip
R. Dale Kincaid	20 ALTIERI WAY	WARWICK	RI	02886

Treasurer Name	Street Address	City	State	Zip
Lisa Weingeroff	20 ALTIERI WAY	WARWICK	RI	02886

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

Director Name	Street Address	City	State	Zip

Director Name	Street Address	City	State	Zip

Director Name	Street Address	City	State	Zip

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

AUTHORIZED SHARES Number of Shares	Class/Series	Par Value
1,000	NO PAR VALUE	

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

ISSUED SHARES Number of Shares	Class/Series	Par Value
200	Common	No Par

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

[redacted] [barcode] *61676*

61676 DBC1/21/033:54:05 PM
File Date 2-20-03
Check No 17038
By RMC
FOR SECRETARY OF STATE USE ONLY

[redacted]

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

[redacted] 1-30-03
Signature of Officer *Date*

Lisa Weingeroff
Print or Type Name of Officer

[redacted] President
Title of Officer

Form 630 12-91

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

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

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

STOP PLEASE READ INSTRUCTIONS

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 61676

2. Name of Corporation JJI International, Inc.

3. Street Address Principal Business Office 20 Altieri Way

City Warwick *State* RI *Zip* 02886

4. Business Phone No 732-8668

5. State of Incorporation RHODE ISLAND

6. SIC Code 1883

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

Design, manufacture, distribute jewelry gifts and associated products.

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

President Name Lisa Weingeroff
Street Address 20 Altieri Way
City Warwick *State* RI *Zip* 02886

Vice President Name R. Dale Kincaid
Street Address SAME
City *State* *Zip*

Secretary Name R. Dale Kincaid
Street Address SAME
City *State* *Zip*

Treasurer Name Lisa Weingeroff
Street Address SAME
City *State* *Zip*

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

Director Name
Street Address
City *State* *Zip*

Director Name
Street Address
City *State* *Zip*

Director Name
Street Address
City *State* *Zip*

Director Name
Street Address
City *State* *Zip*

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

AUTHORIZED SHARES

Number of Shares	*Class/Series*	*Par Value*
1,000	NO PAR VALUE	

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

ISSUED SHARES

Number of Shares	*Class/Series*	*Par Value*
200	Common	No Par

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

[redacted]

* 6 1 6 7 6 *

File Date: 2/26/02

Check No.: 15678

By: RCT

FOR SECRETARY OF STATE USE ONLY

[redacted]

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

By: L. Weingeroff, President 2/14/02
Signature of Officer *Date*

Lisa Weingeroff
Print or Type Name of Officer

President
Title of Officer

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

Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001

Filing Period: January 1–March 1 • Filing Fee: $50.00

STOP PLEASE READ INSTRUCTIONS

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 61676

2. Name of Corporation JJI International, Inc.

3. Street Address Principal Business Office 20 Altieri Way

City Warwick *State* RI *Zip* 02886

4. Business Phone No. 732-8668

5. State of Incorporation RHODE ISLAND

6. SIC Code 1885

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

Design, manufacture, distribute jewelry gifts and associated products

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

President Name Lisa Weingeroff
Street Address 20 Altieri Way
City Warwick *State* RI *Zip* 02886

Vice President Name R. Dale Kincaid
Street Address same
City *State* *Zip*

Secretary Name R. Dale Kincaid
Street Address same
City *State* *Zip*

Treasurer Name Lisa Weingeroff
Street Address same
City *State* *Zip*

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

Director Name
Street Address
City *State* *Zip*

Director Name
Street Address
City *State* *Zip*

Director Name
Street Address
City *State* *Zip*

Director Name
Street Address
City *State* *Zip*

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

AUTHORIZED SHARES

Number of Shares	*Class/Series*	*Par Value*
1,000 SHS	NO PAR	VAL

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

ISSUED SHARES

Number of Shares	*Class/Series*	*Par Value*
200	Common	No Par

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

[redacted] [redacted]

** 6 1 6 7 6 **

File Date: 2/16

Check No. 14269

By. Cc

FOR SECRETARY OF STATE USE ONLY

[redacted]

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 By: Lisa Weingeroff Pres. *Date* 1/31/01

Print or Type Name of Officer Lisa Weingeroff

Title of Officer President

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

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040

STOP
PLEASE READ INSTRUCTIONS

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000

Filing Period: January 1–March 1 • Filing Fee: $50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 61676

2. Name of Corporation JJI International, Inc.

3. Street Address Principal Business Office 20 Altieri Way

City Warwick *State* RI *Zip* 02886

4. Business Phone No 732-8668

5. State of Incorporation RHODE ISLAND

6. SIC Code 1883

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

Design, manufacture, distribute jewelry gifts and associated products.

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

President Name Lisa Weingeroff
Street Address 20 Altieri Way
City Warwick *State* RI *Zip* 02886

Vice President Name R. Dale Kincaid
Street Address same
City *State* *Zip*

Secretary Name R. Dale Kincaid
Street Address same
City *State* *Zip*

Treasurer Name Lisa Weingeroff
Street Address same
City *State* *Zip*

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

Director Name
Street Address
City *State* *Zip*

Director Name
Street Address
City *State* *Zip*

Director Name
Street Address
City *State* *Zip*

Director Name
Street Address
City *State* *Zip*

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

AUTHORIZED SHARES

Number of Shares	*Class/Series*	*Par Value*
1,000 SHS	NO PAR VAL	

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

ISSUED SHARES

Number of Shares	*Class/Series*	*Par Value*
200	Common	No Par

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

* 6 1 6 7 6 *

File Date: 2-16-00

Check No.: 11387

By: AMF

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.

By: Lisa Weingeroff 2/7/00
Signature of Officer *Date*

Lisa Weingeroff
Print or Type Name of Officer

President
Title of Officer

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

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1999

Filing Period: January 1–March 1 • Filing Fee: $50.00

STOP PLEASE READ INSTRUCTIONS

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.: 61676
2. Name of Corporation: JJI International, Inc.
3. Street Address Principal Business Office: 20 Altieri Way — City: Warwick — State: RI — Zip: 02886
4. Business Phone No.: 732-8668
5. State of Incorporation: RHODE ISLAND
6. SIC Code: 1883
7. Brief Description of the Character of Business Conducted in Rhode Island: Design, manufacture & distribute jewelry gift and associated products.

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

President Name: Lisa Weingeroff	Vice President Name: R. Dale Kincaid
Street Address: 20 Altieri Way	Street Address: same
City: Warwick — State: RI — Zip: 02886	City — State — Zip
Secretary Name: R. Dale Kincaid	Treasurer Name: Lisa Weingeroff
Street Address: same	Street Address: same
City — State — Zip	City — State — Zip

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

Director Name	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

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

AUTHORIZED SHARES		
Number of Shares	Class/Series	Par Value
1,000 SHS NO PAR VAL		

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

ISSUED SHARES		
Number of Shares	Class/Series	Par Value
200	Common	No Par

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

* 6 1 6 7 6 *

File Date: 2/9/99

Check No.: 9944

By:

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.

By: Lisa Weingeroff Pres. 2/9/99

Signature of Officer — *Date*

Lisa Weingeroff

Print or Type Name of Officer

President

Title of Officer

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

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-277-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1998

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

STOP
PLEASE READ INSTRUCTIONS

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 61676
2. Name of Corporation JJI International, Inc.

3. Street Address Principal Business Office: Three Richmond Square
City: Providence
State: RI
Zip: 02906

4. Business Phone No.: 454-7310
5. State of Incorporation: RHODE ISLAND
6. SIC Code: 1883

7. Brief Description of the Character of Business Conducted in Rhode Island
Design, manufacture & distribute jewelry gift and associated products.

8. NAMES AND ADDRESSES OF THE OFFICERS *("X" BOX FOR ATTACHMENT)*

President Name: Lisa Weingeroff
Street Address: Three Richmond Square
City: Providence
State: RI
Zip: 02906

Vice President Name: R. Dale Kincaid
Street Address: same
City:
State:
Zip:

Secretary Name: R. Dale Kincaid
Street Address: same
City:
State:
Zip:

Treasurer Name: Lisa Weingeroff
Street Address: same
City:
State:
Zip:

9. NAMES AND ADDRESSES OF THE DIRECTORS *("X" BOX FOR ATTACHMENT)*

Director Name:
Street Address:
City:
State:
Zip:

Director Name:
Street Address:
City:
State:
Zip:

Director Name:
Street Address:
City:
State:
Zip:

Director Name:
Street Address:
City:
State:
Zip:

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

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value
1,000 SHS	NO PAR VAL	

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

ISSUED SHARES

Number of Shares	Class/Series	Par Value
200	Common	No Par

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

[redacted] * 6 1 6 7 6 *

File Date: 2-5-98
Check No.: 8401
By: 100

FOR SECRETARY OF STATE USE ONLY

[redacted]

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.

Lisa Weingeroff 2/2/98
Signature of Officer *Date*

Lisa Weingeroff
Print or Type Name of Officer

President
Title of Officer

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

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-277-3040

PROFIT CORPORATION ANNUAL REPORT 1997

Filing Period: January 1–March 1 • Filing Fee: $50.00

STOP: PLEASE READ INSTRUCTIONS BEFORE COMPLETING THIS FORM

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.	2. Name of Corporation
61676	JJI International, Inc.

3. Street Address Principal Business Office	City	State	Zip
Three Richmond Square	Providence	RI	02906

4. Business Phone No.	5. State of Incorporation	6. SIC Code
454-7310	RHODE ISLAND	1883

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

Design, manufacture and distribute jewelry gift and associated products.

8. NAMES AND ADDRESSES OF THE OFFICERS *("X" BOX FOR ATTACHMENT)*

President Name	Vice President Name
Lisa Weingeroff	R. Dale Kincaid
Street Address	Street Address
Three Richmond Square	same
City / State / Zip	City / State / Zip
Providence RI 02906	
Secretary Name	**Treasurer Name**
R. Dale Kincaid	Lisa Weingeroff
Street Address	Street Address
same	same
City / State / Zip	City / State / Zip

9. NAMES AND ADDRESSES OF THE DIRECTORS *("X" BOX FOR ATTACHMENT)*

Director Name	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

10. SHARES AUTHORIZED AND ISSUED *("X" BOX FOR ATTACHMENT)*

AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	*Class/Series*	*Par Value*	*Number of Shares*	*Class/Series*	*Par Value*
1,000 SHS NO PAR VAL			200	Common	No Par

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

* 6 1 6 7 6 *

File Date: 2-5-97

Check No.: 7170

By: LGP / SEC

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 of Officer — *Date* 1/30/97

Lisa E. Weingeroff
Print or Type Name of Officer

President
Title of Officer

PROFIT CORPORATION ANNUAL REPORT

1996

Filing Period: January 1–March 1
Filing Fee: $50.00

State of Rhode Island and Providence Plantations
James R. Langevin, *Secretary of State*
Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335 • (401) 277-3040

PLEASE TYPE OR PRINT IN BLACK INK.

1. CORPORATE ID NO.	2. NAME OF CORPORATION
61676	JJI International, Inc.

3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE	CITY	STATE	ZIP CODE
Three Richmond Square/PO Box 603334	Providence,	RI	02906

4. BUSINESS PHONE NO.	5. STATE OF INCORPORATION	6. SIC CODE
	RHODE ISLAND	1883

7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND

Design, manufacture and distribute jewelry gift and associated products

8. NAMES AND ADDRESSES OF THE OFFICERS

PRESIDENT NAME	STREET ADDRESS	CITY	STATE	ZIP CODE
Lisa Weingeroff	Three Richmond Square	Providence	RI	02906

VICE PRESIDENT NAME	STREET ADDRESS	CITY	STATE	ZIP CODE
R. Dale Kincaid	same			

SECRETARY NAME	STREET ADDRESS	CITY	STATE	ZIP CODE
R. Dale Kincaid	same as above			

TREASURER NAME	STREET ADDRESS	CITY	STATE	ZIP CODE
Lisa Weingeroff	same			

9. NAMES AND ADDRESSES OF THE DIRECTORS

DIRECTOR NAME	STREET ADDRESS	CITY	STATE	ZIP CODE
N/A				

DIRECTOR NAME	STREET ADDRESS	CITY	STATE	ZIP CODE

DIRECTOR NAME	STREET ADDRESS	CITY	STATE	ZIP CODE

DIRECTOR NAME	STREET ADDRESS	CITY	STATE	ZIP CODE

10. SHARES AUTHORIZED AND ISSUED

AUTHORIZED SHARES			ISSUED SHARES		
NUMBER OF SHARES	CLASS / SERIES	PAR VALUE	NUMBER OF SHARES	CLASS / SERIES	PAR VALUE
1,000 SHS	NO PAR VAL		200	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.

By: Lisa E. Weingeroff, President
Signature of Officer

LISA E. Weingeroff
Print or Type Name of Officer

President — 1/18/96
Title of Officer — Date

File Date: 1/31/96
Check No: 6163
By: cm

For Secretary of State Use Only

State of Rhode Island and Providence Plantations
Office of The Secretary of State
100 North Main Street
Providence, Rhode Island 02903-1335
401-277-3040

ANNUAL REPORT
Please Type or Print
File Annually - Jan. 1 - March 1
Filing Fee $50.00
Make Checks Payable to: Secretary of State

ALL ENTRIES MUST BE COMPLETED IN FULL OR THE FORM WILL BE RETURNED.

Corporate ID: 0061676 Annual Report for the year: 1995

Name of Corporation: JJI International, Inc.

Business entity organized under the laws of the State of: Rhode Island

For foreign entity, address and telephone number of principal office:

Phone: ( )

Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):
c/o Steven I. Roenbaum, Esquire
30 Exchange Terrace
Providence, RI 02903-1117
Phone: ( ) 401-831-2600

Business Entity is (check one):
[X] Business Corporation (See RIGL Chapter 7-1.1)
[ ] Professional Service Corporation (See RIGL Chapter 7-5.1)

Brief statement of the character of business conducted in Rhode Island:
Design, manufacture and distribute jewelry gift and associated products

THE NAMES OF THE OFFICERS ARE:

	STREET ADDRESS	CITY/STATE	ZIP CODE
PRESIDENT			
Lisa Weingeroff	Three Richmond Square, P.O. Box 3334	Prov., RI	02906
VICE PRESIDENT			
SECRETARY			
TREASURER			

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE

NUMBER OF SHARES AUTHORIZED (Rider may be attached)

Number of Shares	Class / Series
1000	No Par Value

NUMBER OF SHARES ISSUED AND OUTSTANDING (Rider may be attached)

Number of Shares	Class / Series
No Par Value	1000 shares

Date 2/16, 19 95

By: Lisa Weingeroff
PRINT OR TYPE NAME OF OFFICER SIGNING
PRESIDENT
TITLE OF OFFICER SIGNING

Form 31 1/95

DESIGNATED REGISTERED AGENT FOR SERVICE OF PROCESS:

PLEASE NOTE: If the registered office and/or registered agent indicated below is incorrect, Form 9 must be filed.

STEVEN I. ROSENBAUM
30 EXCHANGE TERRACE
PROVIDENCE RI 02903

PAID
APR 20 1995
CD 5295
SEC'Y OF STATE

Ctrl#3138 mnc

Filing Fee $50.00
Payable to
Secretary of State

PLEASE TYPE or PRINT

File Annually
LLC Sept 1 - Nov 1
CORP. Jan 1 - March 1

State of Rhode Island and Providence Plantations
Office of The Secretary of State

100 North Main Street
Providence, Rhode Island 02903-1335
401-277 3040

Corporate ID: 0061676 Annual Report for the year: 1994

Name of Business Entity: JJI International, Inc.

Business entity organized under the laws of the State of: Rhode Island

Federal Taxpayer Identification Number:

For foreign entity, address and telephone number of principal office:

Phone ( )

Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box)

Three Richmond Square
P.O. Box 3334
Providence, Rhode Island 02906

Phone ( )

Business Entity is (check one)

[X] Business Corporation (See RIGL Chapter 7-1.1)
[ ] Professional Service Corporation (See RIGL Chapter 7-5.1)
[ ] Limited Liability Company (See RIGL 7-16)

Name, title and mailing address of contact person to whom communications may be directed

c/o Steven I. Rosenbaum, Esq.
Poore & Rosenbaum
30 Exchange Terrace
Providence, Rhode Island 02903

Brief statement of the character of business conducted in Rhode Island:

Design, manufacture and distribution of jewelry gift and associated products

Date of Organization: 8/20/1990

Date of Qualification to do business in Rhode Island (if foreign entity):

THE NAMES OF THE OFFICERS ARE:

☐ CHIEF EXECUTIVE OFFICER OR ☒ PRESIDENT (Check One)	STREET ADDRESS	CITY/STATE	ZIP CODE
Lisa Weingeroff	Three Richmond Square, P.O. Box 3334,	Providence Rhode Island	02906
☐ CHIEF OPERATING OFFICER OR ☐ VICE PRESIDENT (Check One)	STREET ADDRESS	CITY/STATE	ZIP CODE
☐ CUSTODIAN OF RECORDS OR ☐ SECRETARY (Check One)	STREET ADDRESS	CITY/STATE	ZIP CODE
☐ CHIEF FINANCIAL OFFICER OR ☐ TREASURER (Check One)	STREET ADDRESS	CITY/STATE	ZIP CODE

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
NAME	STREET ADDRESS	CITY/STATE	ZIP CODE

NUMBER OF SHARES AUTHORIZED (If Applicable)		NUMBER OF SHARES ISSUED AND OUTSTANDING (If Applicable)	
NUMBER	1000	NUMBER	
CLASS	Common	CLASS	
SERIES	No Par Value	SERIES	
PAR VALUE OR WITHOUT PAR		PAR VALUE OR WITHOUT PAR	

FILED
JUN 30 1994
By mnc

Date May 19, 1994

By Lisa Weingeroff
PRINT OR TYPE NAME OF OFFICER SIGNING
President
TITLE OF OFFICER SIGNING

Form 3 '94

DESIGNATED REGISTERED OR RESIDENT AGENT FOR SERVICE OF PROCESS:

PLEASE NOTE: If the Corporation has changed its registered office and/or registered or resident agent, Form 9 or Form LLC 3 must be filed

STEVEN I. ROSENBAUM
128 DORRANCE ST/450 SHAKESPEARE HL
PROVIDENCE RI 02903

Filing Fee $50.00

2014713

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID: 0061676 Annual Report for the year 1993

FIRST: The name of the corporation is Joliejewels, Inc.

SECOND: It is incorporated under the laws of RI

THIRD: Character of business, briefly stated, is jewelry sales and manufacturing

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island Three Richmond Sq. Providence RI 02906

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
Lisa Weingeroff	President	101 Ocean Rd #203 Narr RI 02882
" "	Vice President	" "
R. D. Kincaid	Secretary	8 Cedar Rd Narr RI 02882
" "	Treasurer	" "

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
1000	Common		no par

PAID
MAR 04 1993
SECRETARY OF STATE

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
200	Common		no par

Dated 2-5 1993

Jolie Jewels, Inc.
(Name of Corporation)

By Lisa Weingeroff

Title President

(Report must be signed by an officer)

Form 31 1/85

Filing Fee $50.00

1000

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 1676 — Annual Report for the year 1992

FIRST: The name of the corporation is Jolie Jewels, Inc.

SECOND: It is incorporated under the laws of RI

THIRD: Character of business, briefly stated, is Jewelry manufacturing, sales + All related activities

FOURTH: If foreign corporation, address of its principal office N A

FIFTH: Business address in Rhode Island 1478 Atwood Ave. Johnston RI

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
	Director	n/a
	Director	n/a
	Director	n/a
Lisa E Weingeroff All Offices	President	[redacted] 101 Ocean Rd #203 Narr. RI 02882
" "	Vice President	
" "	Secretary	All Offices
" "	Treasurer	

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
1000	Common		no par

Rec'd & Filed MAR 28 1992

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	Common	—	no par

Dated 3/25/ 1992

Jolie Jewels, Inc.
(Name of Corporation)

By Lisa Weingeroff

Title President

(Report must be signed by an officer)

$ 50.00
Filing Fee $15.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 61676 Annual Report for the year 1991

FIRST: The name of the corporation is JO'leJewels, Inc

SECOND: It is incorporated under the laws of RI

THIRD: Character of business, briefly stated, is Jewelry sales, manufacturing marketing and other business purposes authorized under the RI Laws

FOURTH: If foreign corporation, address of its principal office n/a

FIFTH: Business address in Rhode Island 1478 Atwood Ave #9
Johnston RI 02919

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
n/a	Director	—
n/a	Director	—
n/a	Director	—
Lisa Weingerzoff	President	101 Ocean Rd #203 Narr RI 02882
"	Vice President	"
"	Secretary	"
"	Treasurer	"

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
1000	—	—	no par value

PAID
FEB 21 1991
SEC'Y OF STATE

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	—	—	no par value

Dated 2/23 19 91

JO'leJewels, Inc.
(Name of Corporation)

By Lisa E. Weingerzoff, Pres.

Title President

(Report must be signed by an officer)