



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2021
Corporation

FILED

STAMP

- Filing period: January 1 - March 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by April 1.

BY [Signature]
FEB 24 2021

1. Entity ID Number 71995		2. Exact name of the Corporation REEL TO REAL RECORDING STUDIO, INC.			
3. Principal Office Address 90 Connecticut Street			City Cranston	State RI	Zip 02920
4. NAICS Code 71510		6. Brief description of the character of business conducted in Rhode Island Production, Promotion, Advertising and Publishing of Recordings			
5. State of Incorporation Rhode Island					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Anthony Marrapese			Vice-President Name Lori Marrapese		
Street Address 43 Cottonwood Drive			Street Address 43 Cottonwood Drive		
City Cranston	State RI	Zip 02920	City Cranston	State RI	Zip 02920
Secretary Name Lori Marrapese			Treasurer Name Anthony Marrapese		
Street Address 43 Cottonwood Drive			Street Address 43 Cottonwood Drive		
City Cranston	State RI	Zip 02920	City Cranston	State RI	Zip 02920
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Anthony Marrapese			Director Name		
Street Address 43 Cottonwood Drive			Street Address		
City Cranston	State RI	Zip 02920	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/SERIES	PAR VALUE
			NONE		
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. 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.					
Name of Authorized Representative Anthony Marrapese-President				Date 1-20-21	
Signature of Authorized Representative <u>[Signature]</u>					