State of Rhode Island Department of State - Business Services Division					FILED '	
Annual Report for the year: 2024				FEB 0,6 2024		
→ Filing period: Februa	BY 1016					
→ Filing Fee: \$50.00		•	· · (· · · · · · · · · · · · · · · · · 			
Penalty: Additional \$2						<u> </u>
1. Entity ID Number		of the Corporation	Star C	reations, I	, M	
3. Principal Office Address	Lucy	· IMI) LUD.	_		TState	Zip
11 Owen Aw	Pound	ucket	State	09860		
4. NAJES Code						
323117. manufacture and sell novelty Hens and childrens books						
5. State of Incorporation RT	based o	n Crustasea	en Hen	ns with a zi	pper ope	ning
7. List ALL officers (names a	nd addresses)			**	x to indicate ar	n attachment 🔲
President Name Michel	Vice-President Name Joshua M LeBeau					
Street Address 11 Owen Avenue			Street Address 11 OWEN AVENUE			
City Pawtucket	State RT	Zip 02860	City Pau	utucket	State RI	- Z _{IP} 0280
Secretary Name) Carry	Treasurer N		<u> </u>	L
<u> </u>			100000000000000000000000000000000000000		.	· · · · -
Street Address			Street Address			
City	State	Zip	Crty		State	Zıp
8. List ALL directors (names and addresses)			Check the box to indicate an attachment			
Director Name			Director Nar	me		
Street Address	Street Address					
City	State	Zıp	City	<u> </u>	State	Žip
		<u> </u>	<u> </u>		<u></u>	<u> </u>
Director Name	Director Name					
Street Address	Street Address					
City	State	Zip	City		State	Zip
9. Shares Authorized		10. Shares Issue			he box to indicate an attachment	
This information is currently of record in the Department of State.		NUMBER OF S			SFRIES PAR VALUE	
l ·		10,000		Common		<i>-</i> 01
Changes require an additiona	l filing.					
11. This report must be exec					ration is in the	hands of a re-
ceiver or trustee, this report	must be executed on b	ehalf of the corpora	ation by the re	eceiver or trustee		
Under penalty of perjury, i statements, and that all st				, including any accon	ipanying scne	ruurs anu
Name of Authorized Representative Michelle CLeBeau					Date 2-1-24	
1	116				" "	* 1

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615 Phone: (401) 222-3040

Signature of Authorized Representative

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Website: www.sos.ri.gov