



**State of Rhode Island  
Department of State - Business Services Division**

Annual Report for the year: **2024**

Corporation \_\_\_\_\_

- Filing period: February 1 - May 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by May 31.

**FILED**

FEB 23 2024

BY 183916

*[Signature]*

|  |                    |  |   |                    |                       |
|--|--------------------|--|---|--------------------|-----------------------|
| 1. Entity ID Number<br><b>75905</b>  |                    | 2. Exact name of the Corporation<br><b>Fine Art Investments, Ltd.</b>  |   |                    |                       |
| 3. Principal Office Address<br><b>2131 Providence Pike</b>   |                    |  | City<br><b>North Smithfield</b>               | State<br><b>RI</b> | Zip<br><b>02896</b>   |
| 4. NAICS Code<br><b>453920</b>   |                    | 6. Brief description of the character of business conducted in Rhode Island<br><b>The operation of a sales and distribution company for artistic prints and designs.</b> |   |                    |                       |
| 5. State of Incorporation<br><b>RI</b>   |                    |  |   |                    |                       |
| 7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>   |                    |  |   |                    |                       |
| President Name<br><b>Domenic B. Rignanese</b>  |                    |  | Vice-President Name<br><b>Robin Rignanese</b> |                    |                       |
| Street Address<br><b>2131 Providence Pike</b>  |                    |  | Street Address<br><b>2131 Providence Pike</b> |                    |                       |
| City<br><b>North Smithfield</b>  | State<br><b>RI</b> | Zip<br><b>02896</b>  | City<br><b>North Smithfield</b>               | State<br><b>RI</b> | Zip<br><b>02896</b>   |
| Secretary Name<br><b>Robin Rignanese</b>   |                    |  | Treasurer Name<br><b>Domenic B. Rignanese</b> |                    |                       |
| Street Address<br><b>2131 Providence Pike</b>  |                    |  | Street Address<br><b>2131 Providence Pike</b> |                    |                       |
| City<br><b>North Smithfield</b>  | State<br><b>RI</b> | Zip<br><b>02896</b>  | City<br><b>North Smithfield</b>               | State<br><b>RI</b> | Zip<br><b>02896</b>   |
| 8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>  |                    |  |   |                    |                       |
| Director Name<br><b>Domenic B. Rignanese</b>   |                    |  | Director Name                                 |                    |                       |
| Street Address<br><b>2131 Providence Pike</b>  |                    |  | Street Address                                |                    |                       |
| City<br><b>North Smithfield</b>  | State<br><b>RI</b> | Zip<br><b>02896</b>  | City  | State              | Zip                   |
| Director Name  |                    |  | Director Name                                 |                    |                       |
| Street Address   |                    |  | Street Address                                |                    |                       |
| City   | State              | Zip  | City  | State              | Zip                   |
| 9. Shares Authorized <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>   |                    |  |   |                    |                       |
| This information is currently of record in the Department of State.<br><br>Changes require an additional filing.   |                    | NUMBER OF SHARES   |   | CLASSIFICATIONS    | PAR VALUE             |
|  |                    | <b>300</b>   | <b>Common</b>                                 | <b>None</b>        |                       |
| 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.<br><b>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.</b> |                    |  |   |                    |                       |
| Name of Authorized Representative<br><b>Domenic B. Rignanese</b>   |                    |  |   |                    | Date<br><b>2/5/24</b> |
| Signature of Authorized Representative<br><i>[Signature]</i>   |                    |  |   |                    |                       |