



State of Rhode Island  
Department of State - Business Services Division

Annual Report for the year: 2025

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**  
**STAMP**

APR 21 2025



BY 36208

1. Entity ID Number <b>35150</b>		2. Exact name of the Corporation <b>GEM-CRAFT, INC.</b>			
3. Principal Office Address <b>1420 Elmwood Avenue</b>			City <b>Cranston</b>	State <b>RI</b>	Zip <b>02910</b>
4. NAICS Code <b>339999</b>		6. Brief description of the character of business conducted in Rhode Island <b>Jewelry business</b>			
5. State of Incorporation <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 <b>Jennifer Verri</b>			Vice-President Name <b>Christine Higgins</b>		
Street Address <b>1420 Elmwood Avenue</b>			Street Address <b>1420 Elmwood Avenue</b>		
City <b>Cranston</b>	State <b>RI</b>	Zip <b>02910</b>	City <b>Cranston</b>	State <b>RI</b>	Zip <b>02910</b>
Secretary Name <b>Christine Higgins</b>			Treasurer Name <b>Jennifer Verri</b>		
Street Address <b>1420 Elmwood Avenue</b>			Street Address <b>1420 Elmwood Avenue</b>		
City <b>Cranston</b>	State <b>RI</b>	Zip <b>02910</b>	City <b>Cranston</b>	State <b>RI</b>	Zip <b>02910</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			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
9 Shares Authorized		10. Shares Issued <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.  Changes require an additional filing.		NUMBER OF SHARES		CLASS/SERIES	PAR VALUE
		<b>192</b>		<b>Common</b>	<b>No Par Value</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. <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 <b>Jennifer Verri and/or Christine Higgins</b>					Date <b>3-28-25</b>
Signature of Authorized Representative <i>Jennifer Verri</i> <i>Christ M. Higgins</i>					