



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

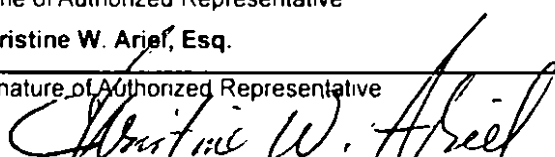
FILED

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BY 5091
LJ

Annual Report for the year: 2019
Corporation

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

1. Entity ID Number 125012		2. Exact name of the Corporation ARIEL LAW ASSOCIATES LTD.			
3. Principal Office Address 70 Romano Vineyard Way, Suite 147			City North Kingstown	State RI	Zip 02852
4. NAICS Code 541110		6. Brief description of the character of business conducted in Rhode Island TO ENGAGE IN THE PRACTICE OF LAW			
5. State of Incorporation RI					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Christine W. Esq.			Vice-President Name		
Street Address 70 Romano Vineyard Way, Suite 147			Street Address		
City North Kingstown	State RI	Zip 02852	City	State	Zip
Secretary Name			Treasurer Name Christine W. Ariel, Esq.		
Street Address			Street Address 70 Romano Vineyard Way, Suite 147		
City	State	Zip	City North Kingstown	State RI	Zip 02852
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
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 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
			50	common	no par
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 Christine W. Ariel, Esq.				Date 1/7/2019	
Signature of Authorized Representative 				SIGN DOCUMENT HERE	