



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2008

Filing Period: January 1 - March 1 • **Filing Fee:** \$50.00* • **THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.**

* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No.		2. Name of Corporation Pops Place + His Son's Pub		
3. Street Address Principal Business Office 115 Cowdrey Ave			City West Warwick	State RI
4. Business Phone No 401-828-4350			5. State of Incorporation RI	
6. Brief Description of the Character of Business Conducted in Rhode Island				
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
President Name DonnaLee Della Grotta			Vice President Name Domenic Schiavulli Jr	
Street Address 74 Steele Ave			Street Address 36 Esek Hopkins Rd	
City Warwick	State RI	Zip 02889	City North Scituate	State RI
Secretary Name DonnaLee Della Grotta			Treasurer Name Domenic Schiavulli Jr	
Street Address 74 Steele Ave			Street Address 36 Esek Hopkins Rd	
City Warwick	State RI	Zip 02889	City North Scituate	State RI
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
Director Name			Director Name	
Street Address			Street Address	
City	State	Zip	City	State
Director Name			Director Name	
Street Address			Street Address	
City	State	Zip	City	State
9. SHARES AUTHORIZED				
10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> ISSUED SHARES -- THIS SECTION MUST BE COMPLETED				
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.			Number of Shares 100	Class/Series
				Par Value

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.

DonnaLee Della Grotta
Signature _____ Date _____
DonnaLee Della Grotta
Print or Type Name
President
Title

File Date	FILED
Check No.	DEC 01 2008
By:	<i>[Signature]</i> 74524
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