



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State - Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2013

Filing Period: January 1 - March 1 • This report must be typed or printed legibly.

Filing Fee: \$50.00 • FAILURE TO FILE THIS REPORT BY MARCH 31 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. 46460		2. Exact name of the Corporation All American Foods, Inc.			
3. Principal office address One All American Way			City North Kingstown	State RI	Zip 02852
4. Business Phone No. (401) 294-5455		5. State of Incorporation Rhode Island			
6. Brief description of the character of business conducted in Rhode Island Wholesaler of meat, seafood, dry goods, and paper goods.					
OFFICERS (NAMES AND ADDRESSES) (X) BOX FOR ATTACHMENT <input type="checkbox"/>					
President Name Leon A. Panteleos			Vice-President Name		
Street Address One All American Way			Street Address		
City North Kingstown	State RI	Zip 02852	City	State	Zip
Secretary Name Leon A. Panteleos			Treasurer Name Leon A. Panteleos		
Street Address One All American Way			Street Address One All American Way		
City North Kingstown	State RI	Zip 02852	City North Kingstown	State RI	Zip 02852
LIST OF DIRECTORS (NAMES AND ADDRESSES) (X) BOX FOR ATTACHMENT <input type="checkbox"/>					
Director Name Leon A. Panteleos			Director Name		
Street Address One All American Way			Street Address		
City North Kingstown	State RI	Zip 02852	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9 SHARES AUTHORIZED			10 SHARES ISSUED (X) BOX FOR ATTACHMENT <input type="checkbox"/>		
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	CLASS/SERIES	PAR VALUE
			2,200	Common	No Par

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.

FILED

JAN 25 2013

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.

Leon A. Panteleos 1-17-13
 Signature of Authorized Representative Date

Leon A. Panteleos
 Print or Type Name of Authorized Representative

FILED IN _____
 COUNTY OF _____
 BY _____
 FOR SECRETARY OF STATE USE ONLY

Ch # 2164