RI SOS Filing Number: 200701108450 Date: 10/05/2007 4:00 PM

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Corporations Division
148 W. River St.
Providence, RI 02904-2615
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2007

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
139030	FINNEGAN'S DRAFT HOUSE, INC.

3. Street Address Principal Business Office	City	State	Zip
397 Westminster Street	Providence	RI	

4. Business Phone No.	5. State of Incorporation
(401) 751-0290	RHODE ISLAND

6. Brief Description of the Character of Business Conducted in Rhode Island
TO OPERATE A TAVERN/BAR

7. NAMES AND ADDRESSES OF THE OFFICERS: ***("X" BOX FOR ATTACHMENT)*** ☐ FILL IN SPACES BEFORE USING ATTACHMENTS

President Name	Street Address	City	State	Zip
Gaetano Gravino, Jr.	24 Red Oak Circle	Warwick	RI	02886

Vice President Name	Street Address	City	State	Zip
Louis Peters	2973 Mendon Road	Cumberland	RI	02864

Secretary Name	Street Address	City	State	Zip
Louis Peters	2973 Mendon Road	Cumberland	RI	02864

Treasurer Name	Street Address	City	State	Zip
Louis Peters	2973 Mendon Road	Cumberland	RI	02864

8. NAMES AND ADDRESSES OF THE DIRECTORS: ***("X" BOX FOR ATTACHMENT)*** ☐ FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name	Street Address	City	State	Zip
Gaetano Gravino, Jr.	24 Red Oak Circle	Warwick	RI	02886

Director Name	Street Address	City	State	Zip
Louis Peters	2973 Mendon Road	Cumberland	RI	02864

Director Name	Street Address	City	State	Zip

Director Name	Street Address	City	State	Zip

9. SHARES AUTHORIZED ***("X" BOX FOR ATTACHMENT)*** ☐

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value
1,000		NO PAR VALUE

10. SHARES ISSUED ***("X" BOX FOR ATTACHMENT)*** ☐

ISSUED SHARES — THIS SECTION MUST BE COMPLETED

Number of Shares	Class/Series	Par Value
None		

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.

[redacted] [redacted]

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.

Signature *Date* 10/5/07

Louis Peters
Print or Type Name

[redacted] Vice President
Title

139030

File Date FILED

Check No. OCT 05 2007

By: 866

By 139-14-180856

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