



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 ~~2006~~ ~~156377~~

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. <u>156377</u> 156377		2. Name of Corporation <u>Mrs Line Convenience & Gas Inc</u>	
3. Street Address Principal Business Office <u>54 Newport ave</u>		City <u>Pawtucket</u>	State <u>RI</u> Zip <u>02861</u>
4. Business Phone No. <u>401-722-7070</u>		5. State of Incorporation <u>RI</u>	
6. Brief Description of the Character of Business Conducted in Rhode Island <u>Gas station / Conv store</u>			
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name <u>Mohammed Y. Kattan</u>		Vice President Name	
Street Address <u>60 Bethel st. Apt 3A</u>		Street Address	
City <u>Cranston</u>	State <u>RI</u>	Zip <u>02920</u>	
Secretary Name <u>Amir Azzam Izoli</u>		Treasurer Name <u>Amir Kattan</u>	
Street Address <u>8 Tripoli st</u>		Street Address <u>101 Oaklawn ave</u>	
City <u>West Warwick</u>	State <u>RI</u>	Zip <u>02880</u>	City <u>Cranston</u> State <u>RI</u> Zip <u>02920</u>
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS			
Director Name <u>Mohammed Kattan</u>		Director Name	
Street Address <u>60 Bethel st Apt. 3A</u>		Street Address	
City <u>Cranston</u>	State <u>RI</u>	Zip <u>02920</u>	
Director Name		Director Name	
Street Address		Street Address	
City	State	Zip	City State Zip
9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) ☐		10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐	
AUTHORIZED SHARES		ISSUED SHARES — THIS SECTION MUST BE COMPLETED	
Number of Shares <u>8,000</u>	Class/Series <u>STK</u>	Par Value <u>0.001</u>	Number of Shares <u>0</u> Class/Series <u>STK</u> Par Value <u>0.001</u>

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.

File Date FILED
Check No. <u>OCT 11 2007</u>
By: <u>039223</u> 3:40
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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 Amir Kattan Date 10-11-07
Print or Type Name Treasurer
Title