



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. 4067		2. Name of Corporation Chelo's Steak House, Inc.			
3. Street Address Principal Business Office 1725 Mendon Road			City Cumberland	State RI	Zip 02864
4. Business Phone No. 312-6500		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island To own and operate a restaurant					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Glenn Chelo			Vice President Name Craig Chelo		
Street Address 5 Stoneridge Drive			Street Address 8 Burlingame Road		
City North Smithfield	State RI	Zip 02896	City Smithfield	State RI	Zip 02917
Secretary Name Randy Chelo			Treasurer Name Gary Chelo		
Street Address 628 Snake Hill Road			Street Address 289 Robin Hollow Road		
City Scituate	State RI	Zip 02857	City West Greenwich	State RI	Zip 02817
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Craig Chelo			Director Name Glenn Chelo		
Street Address 8 Burlingame Road			Street Address 5 Stoneridge Drive		
City Smithfield	State RI	Zip 02917	City No. Smithfield	State RI	Zip 02896
Director Name Randy Chelo			Director Name Gary Chelo		
Street Address 628 Snake Hill Road			Street Address 289 Robin Hollow Road		
City Scituate	State RI	Zip 02857	City West Greenwich	State RI	Zip 02817
9. SHARES AUTHORIZED: ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> AUTHORIZED SHARES			10. SHARES ISSUED: ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
500	Common	no par value	300	Common	no 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.

Signature: Date: 2/4/08
Glenn Chelo
Print or Type Name
President
Title

FILED
File Date: FEB 29 2008
Check No.: 22247
By:
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