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 _2003_

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
000105683	Three Sisters, Inc.

3. Street Address Principal Business Office	City	State	Zip
43 Old Town Road (Box 1303)	Block Island	R.I.	02807

4. Business Phone No.	5. State of Incorporation
908-334-8895	Rhode Island

6. Brief Description of the Character of Business Conducted in Rhode Island
Sandwich Shop

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

President Name	Vice President Name
Mary Brigid Price	NONE

Street Address			Street Address		
75 Wood St.					

City	State	Zip	City	State	Zip
Providence	R.I.	02909			

Secretary Name	Treasurer Name
NONE	NONE

Street Address			Street Address		

City	State	Zip	City	State	Zip

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

Director Name	Director Name
Mary Brigid Price	NONE

Street Address			Street Address		
75 Wood St.					

City	State	Zip	City	State	Zip
Providence	R.I.	02909			

Director Name	Director Name
NONE	NONE

Street Address			Street Address		

City	State	Zip	City	State	Zip

9. SHARES AUTHORIZED

10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐
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	Class/Series	Par Value
	100.00	CNP	$0.00

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**
	OCT 28 2008
Check No.	
	By
By:	
FOR SECRETARY OF STATE USE ONLY	

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 .... 10·14·08 _Date_

Mary Brigid Price
Print or Type Name

President
Title

Form 630 Rev. 08/08