



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. 161233		2. Name of Corporation RAC Group, Inc.			
3. Street Address Principal Business Office 50 Weybosset Street			City Providence	State RI	Zip 02903
4. Business Phone No. 401-331-4087		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island to own and operate restaurants, lounges, and bars.					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Rico A. Conforti			Vice President Name Abigail Cabral		
Street Address 617 Montgomery Street			Street Address 117 South Street		
City Fall River	State MA	Zip 02720	City Somerset	State MA	Zip 02726
Secretary Name Abigail Cabral			Treasurer Name Rico A. Conforti		
Street Address 117 South Street			Street Address 617 Montgomery Street		
City Somerset	State MA	Zip 02726	City Fall River	State MA	Zip 02720
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name none			Director Name		
Street Address			Street Address		
City	State	Zip	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 checked="" 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.			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
			Number of Shares 0	Class/Series	Par Value \$.45

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  
NOV 03 2008 1:45  
By 072262 KMC

File Date
Check No.
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

Rico A. Conforti

Print or Type Name

President

Title

Date

Form 630 Rev. 08/08