



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 2009

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. 106564		2. Name of Corporation Bailey's Pub Incorporated					
3. Street Address Principal Business Office 1910 Smith Street		City North Providence	State Rhode Island	Zip 02911			
4. Business Phone No. (401) 353-7070		5. State of Incorporation Rhode Island					
6. Brief Description of the Character of Business Conducted in Rhode Island Pub - Restaurant							
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS							
President Name Calvin C. Bailey		Vice President Name Cheryl Bailey					
Street Address 100 Paris Irons Road		Street Address 100 Paris Irons Road					
City Glocester	State R-I.	Zip 02814	City Glocester	State R-I.	Zip 02814		
Secretary Name Nicholas Bailey		Treasurer Name Cheryl Bailey					
Street Address 100 Paris Irons Road		Street Address 100 Paris Irons Road					
City Glocester	State R-I.	Zip 02814	City Glocester	State R-I.	Zip 02814		
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 NONE					
Street Address		Street Address					
City	State	Zip	City	State	Zip		
Director Name NONE		Director Name NONE					
Street Address		Street Address					
City	State	Zip	City	State	Zip		
9. SHARES AUTHORIZED 1000 non par					10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input 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 1000	Class/Series none	Par Value non par

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.	JAN 07 2009
By	By 4923
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: Calvin C. Bailey Date: 1-2-09
Print or Type Name: Calvin C. Bailey
Title: President