



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(cc&d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 000138972		2. Name of Corporation MONSIEUR TOUTON SELECTIONS (RI), LTD.			
3. Street Address Principal Business Office 11 GRANDVIEW ST, UNIT 6			City COVENTRY	State RI	Zip 02816
4. Business Phone No.		5. State of Incorporation RHODE ISLAND			
6. Brief Description of the Character of Business Conducted in Rhode Island WINE DISTRIBUTOR					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name GUILLAUME TOUTON			Vice President Name NEIL AMORUSO		
Street Address 160 EAST 65TH ST, APT 5D			Street Address 3210 COURT ST		
City NEW YORK	State NY	Zip 10021	City YORKTOWN HEIGHTS	State NY	Zip 10598
Secretary Name			Treasurer Name		
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 GUILLAUME TOUTON			Director Name NEIL AMORUSO		
Street Address 160 EAST 65TH ST, APT 5D			Street Address 3210 COURT ST		
City NEW YORK	State NY	Zip 10021	City YORKTOWN HEIGHTS	State NY	Zip 10598
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐		
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 100	Class Series STK	Par Value NPV

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	
File Date	JAN 12 2009
Check No.	
By: <u>402</u>	
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

NEIL AMORUSO

Print or Type Name

VICE PRESIDENT

Title

Date