

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 falling 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.

							
I. Corporate II) No. 121252	2. Name of Corporation LAURITO'S SPIRITS, INC.						
3. Street Address Principal Business Office 1974 MINERAL SPRING AVENUE			NORTH PROVIDENCE	State RI	Zψ 02904		
4. Business Phone No. 5. State of Incorporation (401) 437-6400 RHODE ISLAND							
6 Brief Description of the Character of TO ENGAGE IN RETAIL LI	,						
7. NAMES AND ADDRESSES	OF THE OFFICERS:	("X" BOX FOR ATTAC	CHMENT) FILL IN SPACE	S BEFORE USING ATTA	ACHMENTS		
President Name			Vice President Name				
KEITH E. LAURITO			NONE				
Mireel Address 1974 MINERAL SPRING AVENUE			Street Address				
NORTH PROVIDENCE	State RI	<i>хір</i> 02904	С'їу	State	Zip		
Secretary Name KEITH E. LAURITO			Treasurer Name KEITH E. LAURITO				
Street Address 1974 MINERAL SPRING AVENUE			Street Address 1974 MINERAL SPRING AVENUE				
CH	State	Zip	City	State	Zip		
NORTH PROVIDENCE	RI	02904	NORTH PROVIDENCE	RI	02904		
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTA Director Name NONE		Director Name					
Street Address			Street Address				
City	State	Zip	City	State	Zip		
Director Name			Director Name				
Street Address			Street Address				
СЦу	State	Zip	City	State	Zip		
9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) AUTHORIZED SHARES			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ISSUED SHARES — THIS SECTION MUST BE COMPLETED				
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Vaiue		
8,000 CC	NOMMi	IO PAR	100	COMMON	NO PAR		
This report must be executed this report must be executed or				tion is in the hands of a	receiver or trustee,		

File Date _	1-13-09				
Check No	4732				
Ву:	mne				
FOR SECRETARY OF STATE USE ONLY					

Under penalty of perjury, I declare and affin			
including any accompanying schedules and	l statements, and	that	all statements
contained herein are true and correct.		1)
trunk 5 trux	1	10	09
Signature	Date		
KEITH E. LAURITO			
Print or Type Name			

Title