



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 02904-2611
401.222.3041

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. 321618		2. Name of Corporation Rod and Santi, Inc.			
3. Street Address Principal Business Office 265 Barton St.			City Pawtucket	State RI	Zip 02860
4. Business Phone No. 401-724-7220		5. State of Incorporation RI			
6. Brief Description of the Character of Business Conducted in Rhode Island liquor store					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Alicia Lopez			Vice President Name		
Street Address 605 Hodges St.			Street Address		
City Taunton	State MA	Zip 02780	City	State	Zip
Secretary Name Hector Lopez			Treasurer Name Alicia Lopez		
Street Address 605 Hodges St.			Street Address 605 Hodges St.		
City Taunton	State MA	Zip 02780	City Taunton	State MA	Zip 02780
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Alicia Lopez			Director Name Hector Lopez		
Street Address 605 Hodges St.			Street Address 605 Hodges St.		
City Taunton	State MA	Zip 02780	City Taunton	State MA	Zip 02780
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
AUTHORIZED SHARES					
Number of Shares 10,000	Class/Series common	Par Value no par			
			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
Number of Shares 100	Class/Series common	Par Value no 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.

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By: **079593**
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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

Alicia Lopez

Print or Type Name

President

Title