



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. 487424		2. Name of Corporation Prestige Bakery & Deli Inc.			
3. Street Address Principal Business Office 242 Broadway #2			City Newport	State RI	Zip 02840
4. Business Phone No. (401) 644-5928		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island to provide baked goods, beverages, light fare in a cafe setting, gift baskets, catering, delivery and private parties, leasing premises and any other legal purpose					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Silvia dos Santos			Vice President Name Silvia dos Santos		
Street Address 242 Broadway #2			Street Address 242 Broadway #2		
City Newport	State RI	Zip 02840	City Newport	State RI	Zip 02840
Secretary Name Silvia dos Santos			Treasurer Name Silvia dos Santos		
Street Address 242 Broadway #2			Street Address 242 Broadway #2		
City Newport	State RI	Zip 02840	City Newport	State RI	Zip 02840
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name			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 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 20	Class/Series common	Par Value none

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.	FEB 3 2009
By:	By 333
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

Silvia dos Santos

Print or Type Name

President

Title

Date

02/02/09