

A. Ralph Mollis, Secretary of State Corporations Division 198 W. River Street Providence, RI 02904-2615 401.222.3040

Form 630 Rev. 08/08

2009 PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

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(e&d)) is

subject to a penalty fee of \$25.00					
1. Corporate ID No. 9523	2. Name of Con LARCO, IN				
3. Street Address Principal Business Office 128 SUMMIT ST			CII)· PAWTUCKET	State RI	χψ 02860
4. Business Phone No. 5. State of Incorporation RHODE ISLAND			•	•	•
6. Brief Description of the Chart LIQUOR SALES BUSIN		cted in Rhode Island			
	SSES OF THE OFFI	CERS: ("X" BOX FOR ATTA	· hand	PACES BEFORE USING	ATTACHMENTS
President Name ANTONIO LOPES			Vice President Name ANTONIO LOPES		
Street Address 128 SUMMIT ST			Street Address 128 SUMMIT ST		
City: PAWTUCKET	State RI	^{Zip} 02860	PAWTUCKET	State RI	^{Z4p} 02860
Secretary Name ANTONIO LOPES			Treasurer Name ANTONIO LOPES		
Street Address 128 SUMMIT ST			Street Address 128 SUMMIT ST		
CID: PAWTUCKET	State RI	Ζιρ 02860	City PAWTUCKET	State RI	Ζιρ 0286 0
	SES OF THE DIRE	ECTORS: ("X" BOX FOR AT		SPACES BEFORE USING	G ATTACHMENTS
Director Name			Director Name		
Street Address			Street Address		
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Director Name			Director Name		
Street Address			Street Address		
CH):	State	Zip	City	State	Zip
). SHARES AUTHORIZE	D		in 10. SHARES ISSUED	 ("X" BOX FOR ATTACE	 HMENT) ∏
			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
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.			Number of Shares	Class/Series	Par Value
			100	COMMON	NO PAR
•		ne corporation by an authorize	,	orporation is in the hands	of a receiver or trustee,
nis report must be execu	ted on behalf of the	e corporation by the receiver	or trustee.		
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File Date	1-09			1 = -	1 · 2 7 .
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FOR SECRETARY O	F STATE USE ONLY		Title		