

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.I. 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.I. 7-1.2-1501(cod)) is

subject to a penalty fee of \$25.00.						
1. Corporate ID No 43398	2. Name of Corporation Martinez and Ge	2. Name of Corporation Martinez and German Liquors, Inc.				
3. Street Address Principal Business Office 310-314 Cranston Street			Providence	State RI	^{Zip} 02907	
4. Business Phone No. 5. State of Incorporation Rhode Island						
6. Brief Description of the Character of SELLING ALCOHOLIC AND			ELATED FOOD ITEMS).	ar and a second	
7. NAMES AND ADDRESSES	OF THE OFFICERS	: ("X" BOX FOR ATTA	CHMENT) FILL IN	SPACES BEFORE USING A	ATTACHMENTS	
President Name			Vice President Name			
Raul Martinez, Jr.			Raul Martinez, Jr.			
Street Address 331 Dexter Street			Street Address 331 Dexter Street			
Gity Providence	State RI	^{Zip} 02907	City Providence	State RI	02907	
Secretary Name Jacqueline Martinez			Treasurer Name Raul Martinez, Jr.			
Street Address 331 Dexter Street			Street Address 331 Dexter Street			
City Providence	State RI	^{Zip} 02907	City Providence	State RI	02907	
8. NAMES AND ADDRESSES	OF THE DIRECTOR	RS: <i>("X" BOX FOR ATT</i>	TACHMENT) 🔲 FILL I	N SPACES BEFORE USING	ATTACHMENTS	
Director Name			Director Name			
Raul Martinez, Jr.						
Street Address			Street Address			
331 Dexter Street						
City	State	Zip	City	State	Zip	
Providence	RI	02907				
Director Name	***************************************		Director Name		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Street Address			Street Address			
City	State	Zip	Ctty	State	Zip	
9. SHARES AUTHORIZED			10 CHAPES ISSUED	 C"Y" ROY FOR ATTACH	 IMENT) [7]	
y. Shares authorized			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ISSUED SHARES — THIS SECTION MUST BE COMPLETED			
			Number of Shares	Class/Series	Par Value	
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of						
			200	COMMON	NO PAR VALUE	
instruction sheet.						
			1			
This report must be executed				corporation is in the hands	rof a receiver or trustee,	
this report must be executed	on behalf of the corp	poration by the receiver	or trustee.			
			,)	
			Under penalty of	perjury, I declare and affirm t	hat I have examined this ren	
				companying schedules and sta		
		7		are true and correct	/ /-	
File Date 2-6-	.04		//		1/29/19	
File Date	1/		Signlature		Date	
Check No	4579			,	Dane	
CHECK HO.			Raul Martin			
By:	me		Print or Type Nan	ne		
		1	President			
FOR SECRETARY OF STA	ATE USE ONLY		Title			
1		—			Form 630 Rev 08/08	