



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. 152242		2. Name of Corporation Renbar, Inc.			
3. Street Address Principal Business Office c/o 67 Cedar Street			City Providence	State RI	Zip 02903
4. Business Phone No. 401-273-0200		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island Restaurant and Catering					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Tyler Barron			Vice President Name Steven Renzi		
Street Address 4 Woodlake Drive			Street Address 10 Griswold Avenue 75 Independence way 4010		
City Johnston	State RI	Zip 02919	City Cranston	State RI	Zip 02910 02921
Secretary Name Tyler Barron			Treasurer Name Steven Renzi		
Street Address 4 Woodlake Drive			Street Address 10 Griswold Avenue		
City Johnston	State RI	Zip 02919	City Cranston	State RI	Zip 02910
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name None			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 8,000			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐ 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 200	Class/Series Common	Par Value .00

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	2-10-09
Check No.	2953
By:	MNC
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
Tyler Barron
Print or Type Name
President
Title

Date
1/28/09