

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 pen	alty fee of \$25.00.	fusing to file its annual report within	iniriy (30) auys aji	er the time prescribed by	
1. Corporate ID No. 53996		2. Name of Corporation Fed-Rick Veal Company, Inc.				
3. Street Address Principal Business Office 125 Sutton Street			City Providence	State RI	^{Zip} 02903	
4. Business Phone No. (401) 751-9534		5. State of Incorporat Rhode Island				
6. Brief Description of the Chara Wholesale and Retail M	cter of Business Conduct eat Market	ed in Rhode Island	Min., M. 1,		<u> </u>	
	SES OF THE OFFIC	ERS: ("X" BOX FOR A	TTACHMENT) [FILL IN SPACE	S BEFORE USING	ATTACHMENTS	
President Name Carmine R. Balzano			Vice President Name Diane L. Balzano			
Street Address			Street Address			
125 Sutton Street			125 Sutton Street			
City Providence	State RI	^{Zip} 02903	பர் Providence	State RI	<i>Zip</i> 02903	
Secretary Name		102000	Treasurer Name	1	102000	
Diane L. Balzano			Carmine R. Balzano			
Street Address 125 Sutton Street			Street Address 125 Sutton Street			
City Providence	State RI	^{Zip} 02903	City Providence	State RI	2ip 02903	
	1	· ·	ATTACHMENT) [FILL IN SPACE			
Director Name			Director Name			
Street Address			Street Address			
City	State	Zip	City:	State	Zip	
Director Name	J	I	Director Name	l		
Street Address			Street Address			
City	State	Zip	СНу	State -	Zip	
9. SHARES AUTHORIZED	 	 NTTACHMENT): □	10. SHARES ISSUED ("X"	 BOX FOR ATTACI	IMENT)	
AUTHORIZED SHARES			ISSUED SHARES — THIS SECTION MUST BE COMPLETED			
Number of Shares	Class-Series	. Par Value	Number of Shares	Class/Series	Par Value	
600 Common No Par			600	Common	No Par	
					V. 1 0 % . V. 1 V. 1	
This report must be execu	ted on behalf of the	corporation by an author	orized representative. If the corpora	tion is in the hand	s of a receiver or trustee,	
this report must be execut	ed on behalf of the	corporation by the recei	ver or trustee.			
			Under penalty of perjury.	I declars and uffice	that I have examined this report,	
			including any accompany	ing so edules and st	itements, and that all statements	
2-	19-19		contained herein are true	and correct		
File Date			Signature S	- Jeno	Date	
Check No	.65	·	Carmine R. Balza		A IIIV	
Ву:	mnc	ノ	Print or Type Name	The state of the s		
FOR SECRETARY OF	STATE USE ONLY		President	President		

Title