

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. 7-1.2-150).

1. Corporate ID No. 72641	2. Name of Corporation Barney Restaura	2. Name of Corporation Barney Restaurant Company Inc.				
3. Street Address Principal Business Office 1375 Warwick Avenue			City Warwick	State RI	2tp 02888	
4. Business Phone No. 5. State of Incorporation 401-463-5600 Rhode Island			•	L		
6. Brief Description of the Character of restaurant	of Business Conducted in I	Rhode Island				
7. NAMES AND ADDRESSES President Name	OF THE OFFICERS:	("X" BOX FOR ATT	ACHMENT) FILL IN	SPACES BEFORE USING	G ATTACHMENTS	
Nancy Langlais			Vice President Name			
Street Address 205 Smith Street			Street Address			
<i>City</i> Warwick	State RI	Ζίρ 02886	City:	State	Zip	
Secretary Name George Langlais		, 44 * * * * * * * * * * * * * * * * * *	Treasurer Name	•••••••		
Street Address 205 Smith Street			Street Address			
City Warwick	State RI	Zip	City	State	Zip	
8. NAMES AND ADDRESSES Director Name		02886 S:	FACHMENT)	N CRACES PERCORD WALL		
Director frame		or (A DOATOR AL.	Director Name	N SPACES BEFORE USIN	G ATTACHMENTS	
Nancy Langlais Street Address			George Langlais			
205 Smith Street			Street Address			
City	State	Zip	205 Smith Street	Control		
Warwick	RI	02886	Warwick	State RI	^{Zip} 02886	
Director Name		***************************************	Director Name			
Street Address			Street Address			
City	State	Zip 6	City	State	Zip	
9. SHARES AUTHORIZED		0	10 CHARRE LECTION	(477)		
			ISSUED SHARES — THIS SE	"X" BOX FOR ATTACE CTION MUST BE COMPLETED	HMENT)	
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	
			500	Common	No Par Valeu	
This report must be executed or	n behalf of the corpo	oration by an authorize	d representative. If the c	orporation is in the hands	s of a receiver or trustee.	
this report must be executed or	behalf of the corpor	ration by the receiver of	or trustee.			
			I Indon-police of -	and a second		
			including any acco	mpanying schedules and sta	hat I have examined this report tements, and that all statement.	
FIL	_ED		contained herein ar	e true and gorrect.) / 0/	
	 		Signature /	j Tunglui		
Check No. TEB &	24 2009		· · · · · · · · · · · · · · · · · · ·	/ / / / / / / / / / / / / / / / / / /	Date	
$_{B_{V}}$ By \bigcirc	sing		Nancy Lan Print or Type Name	giais		
			President			
FOR SECRETARY OF STATI	E USE ONLY		Title			