



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(c), 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)(4)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 127359		2. Name of Corporation HARRY'S NEW YORK SYSTEM, INC.			
3. Street Address (Principal Business Office) 2168 ELMWOOD AVENUE			City WARWICK	State RI	Zip 02888
4. Business Phone No. 401-785-0712		5. State of Incorporation RHODE ISLAND			
6. Description of the Character of Business Conducted in Rhode Island TRANSACTIONING THE BUSINESS OF A RESTAURANT					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name KATHERINE KAZIANIS			Vice President Name KATHERINE KAZIANIS		
Street Address 12 WOODSTOCK LANE			Street Address 12 WOODSTOCK LANE		
City CRANSTON	State RI	Zip 02920	City CRANSTON	State RI	Zip 02920
Secretary Name STEPHANY STERPIS			Treasurer Name KATHERINE KAZIANIS		
Street Address 12 WOODSTOCK LANE			Street Address 12 WOODSTOCK LANE		
City CRANSTON	State RI	Zip 02920	City CRANSTON	State RI	Zip 02920
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name KATHERINE KAZIANIS			Director Name		
Street Address 12 WOODSTOCK LANE			Street Address		
City CRANSTON	State RI	Zip 02920	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐		
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.			ISSUED SHARES — THIS SECTION <u>MUST</u> BE COMPLETED		
			Number of Shares 100	Class/Series COMMON	Par Value NO PAR VALUE

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.

FILED	
Date FEB 24 2009	
Check No. By 1196	
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 Katherine Kazianis Date Feb 20/09
KATHERINE KAZIANIS
Print or Type Name
PRESIDENT
Title