

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 refixing to file in annual proper within thin (20) I are found to the content of the content

1. Corporate ID No. 122438	2. Name of Corporation Hewtin's Limited				
960 Hope Street				State Rhode Island	<i>Zip</i> <b>02906</b>
Business Phone No. 5. State of Incorporation Rhode Island					<u> </u>
Brief Description of the Character	of Business Conducted in	Rhode Island			
r. NAMES AND ADDRESSES President Name Kristen L. Gennuso	OF THE OFFICERS	: ("X" BOX FOR ATTA	CHMENT) TELL IN Vice President Name Matthew Gennuso		TTACHMENTS
Street Address  1 Armistice Boulevard			Street Address 1 Armistice Boulevard		
<sup>টোঢ়</sup> Pawtucket	State Rhode Island	<sup>Zip</sup> 02860	City Pawtucket	State Rhode Island	<sup>Zip</sup> 02860
ecretary Name Matthew Gennuso			Treasurer Name Kristen L. Gennuso		
treet Address  1 Armistice Boulevard			Street Address 1 Armistice Boulevard		
Pawtucket	State Rhode Island	<sup>Zip</sup> 02860	City Pawtucket	State Rhode Island	<sup>Ζiμ</sup> 02860
3. NAMES AND ADDRESSES  Director Name  None	OF THE DIRECTOR	S: ("X" BOX FOR ATT	ACHMENT)   FILL I Director Name	N SPACES BEFORE USING	ATTACHMENTS
treet Address	·		Street Address		
Sity	State	Zip	City	State	Zip
Pirector Name	J		Director Name		
itreet Address			Street Address		
Sity	State	Ζίρ	City	State	Zip
. SHARES AUTHORIZED	I	<u> </u>		 	I MENT) []
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
			200	common	\$1.00 par value
This report must be executed his report must be executed or	on behalf of the corp	poration by an authorize	I d representative. If the	corporation is in the hands o	of a receiver or truste

File Date 24-09	_
Check No6702	
By:	
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.
RUMOVIMUO 2/17/09
Signature J Date
Kristen L. Gennuso
Print or Type Name
President
Tule

Form 630 Rev. 08/08