



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. 149462		2. Name of Corporation Thomsen Acquisition Subsidiary, Inc.			
3. Street Address Principal Business Office 141 Narragansett Park Drive		City East Providence	State RI	Zip 02916	
4. Business Phone No. 401-431-2190		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island Buy and sell wholesale and retail beverage and food to restaurants.					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Edgar B. Thomsen, Jr.			Vice President Name Mary E. Peterson		
Street Address 141 Narragansett Park Drive			Street Address 141 Narragansett Park Drive		
City East Providence	State RI	Zip 02916	City East Providence	State RI	Zip 02916
Secretary Name Susan M. Mirabile			Treasurer Name Roberta Hunt		
Street Address 141 Narragansett Park Drive			Street Address 141 Narragansett Park Drive		
City East Providence	State RI	Zip 02916	City East Providence	State RI	Zip 02916
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Edgar B. Thomsen, Jr.			Director Name		
Street Address 141 Narragansett Park Drive			Street Address		
City East Providence	State RI	Zip 02916	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) ☐					
ISSUED SHARES — THIS SECTION MUST BE COMPLETED					
Number of Shares 100		Class/Series Common		Par Value \$1.00	
THIS SECTION MUST BE COMPLETED					

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: 2-25-09
Check No.: 1161
By: [Signature]
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: [Signature]
Date: 2/19/09
Print or Type Name: Susan M. Mirabile
Title: Secretary