

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(cord)) is

subject to a penalty fee of \$25.00)	, , , , , , , , , , , , , , , , , , , ,				
1. Corporate ID No. 4069	2. Name of Cor Chelo's of	2. Name of Corporation Chelo's of Woonsocket, Inc.				
3. Street Address Principal Business Office 1725 Mendon Road			Cumberland	State RI	^{Zip} 02864	
4 Business Phone No. 5. State of Incorporation 312-6500 Rhode Island						
6. Brief Description of the Chara Owning and operating a		cted in Rhode Island				
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTAC President Name Glenn Chelo			CHMENT) TELL IN SPACES BEFORE USING ATTACHMENTS Vice President Name Craig Chelo			
Street Address 5 Stoneridge Drive			8 Burlingame Road			
City: North Smithfield	State RI	^{Zip} 02896	^{Сйу} Smithfield	State RI	^{Ζίρ} 02917	
Secretary Name Randy Chelo			Treasurer Name Gary Chelo			
Street Address 628 Snake Hill Road			Street Address 289 Robin Hollow Road			
City Scituate	State RI	^{Zip} 02857	City West Greenwich	State RI	^{Ζφ} 02817	
8. NAMES AND ADDRESS Director Name Glenn Chelo	SSES OF THE DIR	ECTORS: ("X" BOX FOR ATT	ACHMENT) TILL IN S Director Name Craig Chelo	SPACES BEFORE USIN	G ATTACHMENTS	
Street Address 5 Stoneridge Drive			Street Address 8 Burlingame Road			
City North Smithfield Director Name	State RI	Zip 02896	City Smithfield Director Name	State RI	Zip 02917	
Randy Chelo			Gary Chelo			
Street Address 628 Snake Hill Road			Street Address 289 Robin Hollow Road			
City Scituate	State RI	^{Zip} 02857	West Greenwich	State RI	02817	
9. SHARES AUTHORIZE	D .	,	10. SHARES ISSUED (ISSUED SHARES — THIS SECT			
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 Sbares	Class/Series	Par Value	
			100	Common	no par value	
		the corporation by an authorize		rporation is in the hand	Is of a receiver or trus	

	Under penalty of perjury, I declare and affirm that I have examined this report,
	including any accompanying schedules and statements, and that all statements
File Date 2-26-09	contained berein are true and correct.
Check No. 26/77	Signification State / Date / Date /
By:	Frint or Type Name President
FOR SECRETARY OF STATE USE ONLY	Title

have examined this report,