State of Rhode Island and Providence Plantations
Office of the Secretary of State

Fee: $50.00

Corporations Division
148 W. River Street
Providence, Rhode Island 02904-2615
Telephone: (401) 222-3040

| LOGOUT |

Business Corporation Annual Report

Filing Period: January 1 - March 1

Help with this form

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.

ANNUAL REPORT YEAR: 2009

1. Corporate ID No. 000136986

2. Name of Corporation Rick-N-Dees Inc.

3. Street Address Principal Business Office:

No. and Street: 36 INDIAN TRAIL

City or Town: COVENTRY State: RI Zip: 02816 Country: USA

4. Business Phone No.

5. State of Incorporation

State:

6. Brief Description of the Character of Business Conducted in Rhode Island

FOOD SERVICE RESTAURANT

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete.

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By 1439

Delete	Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
☐	TREASURER	DENISE MATTHEWS	36 INDIAN TRAIL COVENTRY, RI 02816 USA
☐	SECRETARY	RICHARD E MATTHEWS	36 INDIAN TRAIL COVENTRY, RI 02816 USA
☐	PRESIDENT	RICHARD E MATTHEWS	36 INDIAN TRAIL COVENTRY, RI 02816- USA
☐	VICE PRESIDENT	DENISE MATTHEWS	36 INDIAN TRAIL COVENTRY, RI 02816 USA

Select From Below | Title: | First Name: | Middle Name: | Last Name: | Suffix:
Address: | City: | State: | Zip: | Country:
Clear | Add

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares *Number of Shares*	Total Issued and Outstanding *Num of Shares*
STK		$0.00	100.00	100.00

9. 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.

Filer's Contact Information
(Enter a contact name, mailing address and email.)

Contact Name: RICHARD MATTHEWS
Business Name:
No. and Street: 36 INDIAN TRAIL | - Same Address as -
City or Town: COVENTRY | State: RI | Zip: 02816 | Country: USA
Contact Phone: 401-828-3732 | ext:
Contact Email: CRBURNS1@COX.NET
Clear

Please provide an email address to receive an expedited response from the Corporations Division if the filing is rejected for any reason. If no email address is provided, correspondence from the Division will be sent by mail.

Signed this 17 Day of February, 2009 at 1:30:45 PM. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signature(s) under penalties of perjury, that this instrument is that individual's act and deed or the*

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By 136986

act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.

By Denise Matthews
Signature of Authorized Representative of the Corporation

VP/Treasurer
Title

This report cannot be accepted for filing if an officer has executed the form and he/she is not listed in section 7.

By selecting ACCEPT you hereby acknowledge that this electronic document is submitted in compliance with R.I. Gen. Laws § 7-1.2. You hereby agree that any legal issues or causes of action arising from the submission of this

○ Accept ○ Decline

Click HERE to Submit This Information

Form No. 630
Revised 09/07

Help

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