

A. Ralph Mollis, Secretary of State Corporations Division . 148 W. River Street Providence, RI 02904-2615 401.222.3040

2009

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. 7-1.2-1	501(e), each corporation failing or	refusing to file its annual rej	vort within thirty (30) days a	fter the time prescribed by late (K	.T.G.L. 7~1.2~1301(v&d)) is
adoject to a penalty fee of \$25.00.					
I. Charles and D. Art	2 Amino of Continuation				

subject to a possibly fee of \$2	25.00.	- Marine		· · · · · · · · · · · · · · · · · · ·		
1. Corporate 10 No. 145468		JDMJ Restaurant Group, Inc.				
: Street Autiress Principal Instiness Office 74 Rockcrest Drive			Cranston	State RI	02920	
(401) 464-4435 5. State of its original Rhode Island						
Operation and mana	•	ce and restaurant business.				
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTAC President Name Joseph Tomaselli			CHMENT) : FILL IN SPACES BEFORE USING ATTACHMENTS Wee President Name Donna Tomaselli			
74 Rockcrest Drive			Street Vidross 74-Rockcrest Drive			
City Cranston	State RI	29- 02920	Cranston	State RI	02920	
Secretary Name Joseph Tomaselli	• • • • • • • • • • • • • • • • • • • •		Treasurer Name Donna Tomaselli			
Street Address 74 Rockcrest Drive			Street Address 74 Rockcrest Drive			
Cranston	Sterie RI	^{Zip} 02920	Cranston	State RI	^{%p} 02920	
8. NAMES AND ADD Director Name	RESSES OF THE DIRI	ECTORS: ("X" BOX FOR ATT	*ACHMENT) [] FULLY Director Name	N SPACES BEFORE USIN	G ATTACHMENTS	
Mixed Address			Street Address			
Chy:	Stree	Zap	City	State	Zip	
Director Name			Director Name			
Sired Address			Strem Address			
CU_{Γ}	State	Zip	CH)	State	$Z\eta p$	
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ISSUED SHARES — THIS SECTION MLST BE COMPLETED			
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.			Nonther of Shares	Class/Series	Par Volue	
			100	Common	None	
This report must be eathis report must be ex	executed on behalf of the eccuted on behalf of the	he corporation by an authorize the corporation by the receiver	ed representative. If the or trustee.	corporation is in the hand	ls of a receiver or trustee.	

File Date	FILED
Check A	AR 0 2 2009
^B ≅ Bv	14730
	FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affir including any accompanying spectates and	
contained herein are true and correct.	
Leglature	Date
∫ ∕oseph Tomaselli	
Print or Type Name	
President	
Title	