

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. 7-1.2-150).

* In accordance with R.I.G.L. 7-1.2-1 subject to a penalty fee of \$25.00.	1501(e), each corporation f	tailing or refusing to file its annu	ual report within thirty (30) a	tays after the time prescribed by lat	V (R.I.G.L. /-1.2-1)01(104)/ S	
1. Corporate 11) No. 380	2. Name of Corporation Top This Pizza Crust, Inc.					
3. Street Address Principal Business Office 903 Providence PI Suite 410			Providence	State R1	02903	
		5. State of Incorporation Rhode Island				
6. Brief Description of the Character of Pizza shop	of Business Conducted in	Rhode Island				
7. NAMES AND ADDRESSES	OF THE OFFICERS	: ("X" BOX FOR ATTAC	CHMENT)  FILL IN Vice President Name	SPACES BEFORE USING	ATTACHMENTS	
President Name Roger Dwyer			same			
Street Address 903 Providence PI Ste 410			Street Address			
City Providence	State RI	<sup>Z\$p</sup> 02903	City	State	Zip	
Secretary Name Same			Treasurer Name SAME			
Street Address			Street Address			
City	State	Zip	Сйу	State	Zip	
8. NAMES AND ADDRESSES	 	 RS: <i>("X" BOX FOR ATT</i>	: ACHMENT) ☐ FILL	 IN SPACES BEFORE USIN	G ATTACHMENTS	
Director Name Roger Dwyer			Director Name			
Street Address			Street Address			
903 Providence Pl Ste 41	State	Zip	City	State	Zip	
Providence	]RI	02903				
Director Name			Director Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT)			
75,000			ISSUED SHARES — THIS  Number of Shares	SECTION MUST BE COMPLETED  Class/Series	D Par Value	
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.			75000	common	.01	
This report must be executed	on behalf of the co	rporation by an authorize	d representative. If the	e corporation is in the hand	ds of a receiver or trustee,	
this report must be executed	on behalf of the cor	poration by the receiver	or trustee.			
			Under penalty of	of perjury, I declare and affirm	that I have examined this report	
		7	including any a contained herei	ccompanying schedules and s n are true and correct.	tatements, and that all statement	
File Date FILED		.	11/09	Elleren	34-09	
			Signature /	0	Date	
Check No MAR 0 6 2005	/	-	Roger Dwy			
By: By 1077	1	-	Print or Type No President	ıme		
FOR SECRETARY OF S	TATE USE ONLY		Title			
			i ute		Form 630 Rev. 08/08	