

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

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 3	. , . ,		, , ,	
1. Corporate ID No. 000315893	2. Name of Corporation Blue Line Foodservice Distribution, Inc.				
3. Street Address Principal Business Office 2211 Woodward Avenue			City Detroit	State MI	<i>^{Zip}</i> 48201
4. Business Phone No. 5. State of Inco. 313-983-6000 Michigan		5. State of Incorporation Michigan			
6. Brief Description of the Character of Business Conducted in Rhode Island Wholesale sale of food products, supplies and Equipment					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTAC President Name Christopher Ilitch			CHMENT) TILL IN SPACE Vice President Name	S BEFORE USING ATTA	ACHMENTS
Street Address 2211 Woodward Avenue			Street Address		
City Detroit	State MI	<i>շւր</i> 48201	Сиу	State	Zip
Secretary Name Marian Ilitch			Treasurer Name Marian Ilitch		
Street Address 2211 Woodward Avenue			Street Address 2211 Woodward Avenue		
City Detroit	State MI	^{Zip} 48201	<i>City</i> Detroit	State MI	<i>хър</i> 48201
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTA Director Name Christopher Ilitch			Director Name Michael Ilitch		
Street Address 2211 Woodward Avenue			Street Address 2211 Woodward Avenue		
City	State	Zip	Сиу	State	Zip
Detroit	<u> </u>	48201	Detroit	<u>[MI</u>	[48201
Director Name Marian Ilitch			Director Name		
Street Address			Street Address		
2211 Woodward Avenue					
City Detroit	State MI	^{Zip} 48201	Сцу	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
This information is currently	of record in the Offic	ce of the Secretary of	Number of Shares	Class/Series	Par Value
State. Changes require an additional filing. See Section 9 of instruction sheet.			60,000	Common/None	1.00
This report must be executed this report must be executed of	•	•	d representative. If the corpora	ation is in the hands of a	a receiver or trustee,
ans report must be executed t	in behan of the corpo	ration by the receiver t	or transce.		

_	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 Dase 3-9-09	contained herein are true and correct. 2/27/09
Check No. 868953	Signature Date Marian Ilitch
By: MMC	Pfint or Type Name Secretary/Treasurer
FOR SECRETARY OF STATE USE ONLY	Title