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

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 2008

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. Corporate ID No.	2. Name of Corporation			
147409	I DOLCI OF THAYER ST. INC.			
3. Street Address Principal Business Office		City	State	Zip
2 AMHERST STREET		PROVIDENCE	RI	02909
4. Business Phone No.	5. State of Incorporation			
401- 277- 1002	RHODE ISLAND			
6. Brief Description of the Character of Business Conducted in Rhode Island				

7. NAMES AND ADDRESSES OF THE OFFICERS: ***("X" BOX FOR ATTACHMENT)*** ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name			Vice President Name		
MATTHEW D. OLENIO			NONE		
Street Address			Street Address		
30 LEATHER LEAF TRAIL			N/A		
City	State	Zip	City	State	Zip
N. KINGSTON	RI	02852	N/A	N/A	N/A
Secretary Name			**Treasurer Name**		
RICHARD C. FOX			ELLIOT GOLDSTEIN		
Street Address			Street Address		
131 COURT STREET #11			13 CAMERICE LANE		
City	State	Zip	City	State	Zip
EXETER	NH	03833	SUFFERN	NY	10901

8. NAMES AND ADDRESSES OF THE DIRECTORS: ***("X" BOX FOR ATTACHMENT)*** ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name			Director Name		
PETER LAZOURAS			THOMAS PELLETIER		
Street Address			Street Address		
168 LINCOLN AVENUE			204 BAY AVE		
City	State	Zip	City	State	Zip
BARRINGTON	RI	02806	PATCHOGUE	NY	11772
Director Name			**Director Name**		
BRENDAN E. WHELAN			GERALD RUDICK		
Street Address			Street Address		
52 MISBET STREET			6113 DEERVIEW DR.		
City	State	Zip	City	State	Zip
PROVIDENCE	RI	02906	AUBURN	NY	13021

9. SHARES AUTHORIZED

10. SHARES ISSUED ***("X" BOX FOR ATTACHMENT)*** ☐

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.

ISSUED SHARES — THIS SECTION MUST BE COMPLETED

Number of Shares	Class/Series	Par Value
NONE	NONE	NONE

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.

[redacted]

[redacted]

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature _____ Date _____

ELLIOT GOLDSTEIN
Print or Type Name

CFO
Title

File Date FILED

Check No. MAY 14 2009

By: By D89473 1:17

FOR SECRETARY OF STATE USE ONLY

2009 MAY 14 PM 1:17

[redacted]

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Form 630 Rev. 08/08