



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 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. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 161649		2. Name of Corporation Leprechaun Lounge, Inc.			
3. Street Address Principal Business Office 602 Smithfield Avenue			City Pawtucket	State RI	Zip 02860
4. Business Phone No. 401-742-3372		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island Restaurant / Bar					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Chad Tupper			Vice President Name Chad Tupper		
Street Address 410 Tarkiln Road			Street Address 410 Tarkiln Road		
City Mapleville	State RI	Zip 02839	City Mapleville	State RI	Zip 02839
Secretary Name Chad Tupper			Treasurer Name Chad Tupper		
Street Address 410 Tarkiln Road			Street Address 410 Tarkiln Road		
City Mapleville	State RI	Zip 02839	City Mapleville	State RI	Zip 02839
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Chad Tupper			Director Name Chad Tupper		
Street Address 410 Tarkiln Road			Street Address 410 Tarkiln Road		
City Mapleville	State RI	Zip 02839	City Mapleville	State RI	Zip 02839
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
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 <u>MUST</u> BE COMPLETED		
			Number of Shares	Class/Series	Par Value
			1,000	Common	0.01

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.

FILED
File Date OCT 07 2009
Check No. By DS 11:11 AM
By: 160
FOR SECRETARY OF STATE USE ONLY

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.

Chad A. Tupper
Signature Date
Chad A. Tupper
Print or Type Name
President
Title