



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

A. Ralph Mollis, Secretary of
Corporations Division
148 W. River Street
Providence, RI 02904-
401.222.2222

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2010

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)) subject to a penalty fee of \$25.00.

1. Corporate ID No. 16060		2. Name of Corporation Warwick Foods, Inc.			
3. Street Address Principal Business Office 1980 Warwick Avenue			City Warwick	State Rhode Island	Zip 02889
4. Business Phone No. 401-738-4743		5. State of Incorporation Rhode Island			
6. RESTAURANT 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 Giuseppe Illiano			Vice President Name Salvatore Illiano		
Street Address 1 Meadowbrook Road			Street Address 13115 Patriot Way		
City North Providence	State Rhode Island	Zip 02911	City West Greenwich	State Rhode Island	Zip 02817
Secretary Name Michael Illiano			Treasurer Name Salvatore Illiano		
Street Address 1 Meadowbrook Road			Street Address 13115 Patriot Way		
City North Providence	State Rhode Island	Zip 02911	City West Greenwich	State Rhode Island	Zip 02817
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
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 MUST BE COMPLETED		
			Number of Shares	Class/Series	Par Value
			100	NONE	NO PAR

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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

JAN 07 2010

By *[Signature]*

29-107644

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]
Signature Date

Salvatore Illiano

Print or Type Name

Vice President/Treasurer

Title

File Date _____

Check No. _____

By: _____

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