RI SOS Filing Number: 201057148800 Date: 01/20/2010 4:00 PM

STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Matthew A. Brown, Secretary of State
Corporations Division
148 W. River St., Providence, RI 02904-2615
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2010

Filing Period: January 1 - March 1 ● Filing Fee: $50.00

** 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. 133608

2. Name of Corporation FAYEZ, inc.

3. Street Address Principal Business Office 3736 PAWTUCKET AVENUE — *City* EAST PROVIDENCE — *State* RI — *Zip* 02915-

4. Business Phone No. 4014335770

5. State of Incorporation RHODE ISLAND

6. Brief Description of the Character of Business Conducted in Rhode Island
RESTAURANT

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

President Name ELIE R FREN
Street Address 30 HIGHWOOD DRIVE
City FRANKLIN — *State* MA — *Zip* 02038

Vice President Name RANDA J FREN
Street Address 30 HIGHWOOD DRIVE
City FRANKLIN — *State* MA — *Zip* 02038

Secretary Name ELIE R FREN
Street Address 30 HIGHWOOD DRIVE
City FRANKLIN — *State* MA — *Zip* 02038

Treasurer Name ELIE R FREN
Street Address 30 HIGHWOOD DRIVE
City FRANKLIN — *State* MA — *Zip* 02038

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

Director Name NONE
Street Address
City — *State* — *Zip*

Director Name
Street Address
City — *State* — *Zip*

Director Name
Street Address
City — *State* — *Zip*

Director Name
Street Address
City — *State* — *Zip*

RECEIVED
2010 JAN 20 AM 11:41
SECRETARY OF STATE
CORPORATIONS DIV

9. SHARES AUTHORIZED ***("X" BOX FOR ATTACHMENT)*** ☐

AUTHORIZED SHARES *Number of Shares*	*Class/Series*	*Par Value*
100 NO PAR VALUE		

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

ISSUED SHARES *Number of Shares*	*Class/Series*	*Par Value*
100	COMMON	NO PAR

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] 1 3 3 6 0 8 [redacted]

133608 DBC 01/20/10 04:15:24 PM
File Date JAN 20 2010
Check No. 108704 By
By:
FOR SECRETARY OF STATE USE ONLY
44159-10-450177

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.

X Elie Fren 01-14-2010
Signature of Officer — *Date*

ELIE R FREN
Print or Type Name of Officer

[redacted] PRESIDENT
Title of Officer

Form 630 12/05