

By:

FOR SECRETARY OF STATE USE ONLY

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 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. law (R.I.G.L. 7-1.2-1501(c&d))	7-1.2-1501(e), each co is subject to a penal	orporation failing or refi ty fee of \$25.00.	using to file its annual report i	vithin thirty (30) days afte	er the time prescribed by	
1. Corporate ID No. 106237		2. Name of Corporation Dave's Marketplace of Cumberland, Inc.				
3. Street Address Principal Business Office 2077 Diamond Hill Road			City Cumberland	State RI	^{Zip} 02864	
4. Business Phone No. 5. State of Incorporation 401-333-7979 Rhode Island			n			
6. Brief Description of the Characte To own, maintain, conduc			e, bakery	- 100 = 20		
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR AT President Name			TACHMENT)			
David A. Cesario			None			
Street Address 1361 Stony Lane			Street Address			
<i>Ctty</i> North Kingstown	State RI	<i>Σφ</i> 02852	City	State	Zip	
Secretary Name David A. Cesario			Treasurer Name David A. Cesario			
Street Address 1361 Stony Lane			Street Address 1361 Stony Lane			
Cuy North Kingstown	State RI	<i>շւր</i> 02852	City North Kingstown	State RI	<i>ztp</i> 02852	
None	S OF THE DIRECT	ORS: ("X" BOX FOR	ATTACHMENT) FILL IN Director Name	SPACES BEFORE USING	G ATTACHMENTS	
Street Address			Street Address			
City	State	Zip	City	State	Ztp	
Director Name			Director Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) [AUTHORIZED SHARES			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ISSUED SHARES — THIS SECTION MUST BE COMPLETED			
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value	
600 Co	ommon §	1.00 Par Value	100	Common	\$1.00	
			·			
This report must be executed this report must be executed	d on behalf of the color of the	corporation by an authororporation by the receiv	rized representative. If the corer or trustee.	orporation is in the hands	s of a receiver or trustee,	
			including any accor	mpanying sehedules and sta	hat I have examined this report tements, and that all statements	
File Date	ט	_	contained herein ar	etrue and correct.	Mile	