



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

2009

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

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. 36050		2. Name of Corporation ADJ DONUTS, INC.		
3. Street Address Principal Business Office 1955 Westminster Street		City Providence	State RI	Zip 02909-0000
4. Business Phone No. (401) 751-6688		5. State of Incorporation RI		
6. Brief Description of the Character of Business Conducted in Rhode Island to operate a donut franchise				
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS				
President Name Manuel S. Andrade		Vice President Name Jose M. Dutra		
Street Address 1955 Westminster Street		Street Address 199 Rumstick Road		
City Providence	State RI	Zip 02909-	City Barrington	State RI
Secretary Name John S. Justo		Treasurer Name John S. Justo		
Street Address 396 Love Lane		Street Address 396 Love Lane		
City E. Greenwich	State RI	Zip 02818-	City E. Greenwich	State RI
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS				
Director Name Manuel S. Andrade		Director Name Jose M. Dutra		
Street Address 1955 Westminster Street		Street Address 199 Rumstick Road		
City Providence	State RI	Zip 02909-	City Barrington	State RI
Director Name John S. Justo		Director Name none		
Street Address 396 Love Lane		Street Address none		
City E. Greenwich	State RI	Zip 02818-	City none	State none
9. SHARES AUTHORIZED				
10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐				
ISSUED SHARES — THIS SECTION MUST BE COMPLETED				
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.		Number of Shares 100	Class/Series Common	Par Value 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.

FILED

FEB 01 2010

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.

File Date	BY
Check No.	
By:	
FOR SECRETARY OF STATE USE ONLY	

Signature **Manuel S. Andrade** Date **11/2/09**
Print or Type Name
President
Title