

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

2010 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 subject to a penalty fee of \$25.00. | 1501(e), each corporation | failing or refusing to file its ann | ual report within thirty (30) days after | the time prescribed by law (| (R.I.G.L. 7-1.2-1501(c&d)) is |
|--|--|-------------------------------------|--|------------------------------|--|
| 1. Corporate ID No. 131505 | 2. Name of Corporation O'rourke's Bar & Grille, Inc. | | | | |
| 3. Street Address Principal Business Office 23 Peck Lane | | | City Warwick | State Rhode Island | ^{Zip} 02888 |
| 4. Business Phone No. 5. State of Incorporation 401-499-7063 Rhode Island | | | | | |
| 6. Brief Description of the Character of To own and manage a resta | | Rhode Island | | | |
| 7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTA President Name Michael O'Rourke | | | CHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Vice President Name Lane Deyoe | | |
| Street Address 192 Parkside Drive | | | Street Address 4770 Bucida Road | | |
| City Warwick | State Rhode Island | ^{Zip} 02888 | City Boynton Beach | State Florida | ^{Zip} 33436 |
| Secretary Name Michael O'Rourke | | | Treasurer Name Michael O'Rourke | | |
| Street Address 192 Parkside Drive | | | Street Address 192 Parkside Drive | | |
| City Warwick | State Rhode Island | ^{Zip} 02888 | <i>City</i> Warwick | State Rhode Island | <i>Σφ</i> 02888 |
| 8. NAMES AND ADDRESSES Director Name Michael O'Rourke Street Address | OF THE DIRECTOR | RS: ("X" BOX FOR ATT | TACHMENT) FILL IN SPACE Director Name Street Address | CES BEFORE USING | ATTACHMENTS |
| 192 Parkside Drive | | | | | |
| City Warwick Director Name | Rhode Island | ^{Zip} 02888 | City Director Name | State | Zip |
| Street Address | | | Street Address | | |
| City | State | Zip | City | State | Zip |
| 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 | Class/Series | Par Value |
| | | | 500 | Common | No par value |
| | | | | | |
| This report must be executed this report must be executed of | | | Under penalty of perjury, | I declare and affirm tha | of a receiver or trustee, t I have examined this report grents, and that all statements |
| File Date FEB 16 | <u> </u> | | Signature | and correct.) Of auck | 2 2/1/10 Date |
| 8v 5156 | | | Michael O'Rourke Print or Type Name | | |

President

Title