



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
401.223.5040

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)(2)), is subject to a penalty fee of \$25.00.

1. Corporate ID No. 35560		2. Name of Corporation NOCERA'S LIQUOR STORE, INC.			
3. Street Address Principal Business Office 969 Smith Street			City Providence	State RI	Zip 02908
4. Business Phone No. 401-421-8767		5. State of Incorporation RHODE ISLAND			
6. Brief Description of the Character of Business Conducted in Rhode Island To maintain and operate a liquor store					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Niall Murphy			Vice President Name Francis E. Williams		
Street Address 252 Jastram Street			Street Address 40 Anchorage Court		
City Providence	State RI	Zip 02908	City Bristol	State RI	Zip 02809
Secretary Name Rosemary Nocera-Williams			Treasurer Name Francis E. Williams		
Street Address 40 Anchorage Court			Street Address 40 Anchorage Court		
City Bristol	State RI	Zip 02809	City Bristol	State RI	Zip 02809
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Rosemary Nocera-Williams			Director Name Francis E. Williams		
Street Address 40 Anchorage Court			Street Address 40 Anchorage Court		
City Bristol	State RI	Zip 02809	City Bristol	State RI	Zip 02809
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED 300 COMMON NO PAR			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
			80	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.

File Date **FILED**
Check No. **FEB 17 2010**
By **8921**
FOR SECRETARY OF STATE USE ONLY

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

Niall Murphy

Date

2/8/10

Print or Type Name

President

Title