

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. 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(ccrd)) is

subject to a penalty fee of \$25.00. 1. Corporate ID No. 2:Name of Cortioration 56537 Stefanos, Inc. 3. Street Address Principal Business Office City Cranston 555 Atwood Avenue RI 02919 4. Business Phone No. 5. State of Incorporation Rhode Island 6. Brief Description of the Character of Business Conducted in Rhode Island engage in all lines of food prepration, whole and retail distribution, operation of restaurant President Name Vice President Name STEVEN PELLEGRINO Street Address Street Address 555 Atwood Avenue City ZipCranston RI 02919 Secretary Name JOHN D. BIAFORE STEVEN PELLEGRINO Street Address Street Address 123 Dyer Street, Suite 3B 555 Atwood Avenue City **Providence** RΙ 02903 Cranston RI 02919 8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) 

FILL IN SPACES BEFORE USING ATTACHMENTS Director Name STEVEN PELLEGRINO Street Address Street Address 555 Atwood Avenue City State Zip City State Zip Cranston RI 02919 Director Name Director Name Street Address Street Address State Ζip State Zip9. 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 Number of Shares Class/Series Par Value State. Changes require an additional filing. See Section 9 of 100 Common No par value instruction sheet. THIS SECTION

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.

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| Under penalty of perjury, I declare and af including any accompanying schedules a | firm that I have examined this report<br>nd statements, and that all statement |
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| contained herein are true and correct.  | 3/4/1  |
| Signature   | 2//6//*  |
|   | / Date   |
| STEVEN PELLEGRINO   |  |
| Print or Type Name  |  |
| PRESIDENT   |  |
| Title   |  |