



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

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&d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 83904		2. Name of Corporation END ZONE PAST GRILLE INC			
3. Street Address Principal Business Office 5835 Post Road			City EAST GREENWICH	State RI	Zip 02818
4. Business Phone No. (401) 885-8226		5. State of Incorporation RI			
6. Brief Description of the Character of Business Conducted in Rhode Island Restaurant & Lounge					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Thomas V. Melillo Jr.			Vice President Name		
Street Address 107 Old Rose Hill Rd			Street Address		
City South Kingstown	State RI	Zip 02879	City	State	Zip
Secretary Name Thomas V. Melillo Jr.			Treasurer Name Thomas V. Melillo Jr.		
Street Address 107 Old Rose Hill Rd			Street Address 107 Old Rose Hill Road		
City South Kingstown	State RI	Zip 02879	City South Kingstown	State RI	Zip 02879
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Thomas V. Melillo Jr.			Director Name		
Street Address 107 Old Rose Hill Road			Street Address		
City South Kingstown	State RI	Zip 02879	City	State	Zip
Director Name			Director Name		
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 400		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

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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.

Thomas V. Melillo Jr. 2-26-10
Signature Date

Thomas V. Melillo Jr.
Print or Type Name

President
Title

File Date _____
Check No. _____ BY _____
By: _____
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