

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(e)) is

subject to a penalty fee of \$25.00. 1. Corporate ID No. 2. Name of Corporation

000324227	M & N Men	M & N Mendolia Corp.				
3. Street Address Principal Business Office 116 Granite Street		<i>ार्</i> Westerly	State RI	<sup>Zip</sup> 02891		
6. Business Phone No. 5. State of Incorporation Rhode Island		•	•			
5. Brief Description of the Chara To operate the retail sal	cter of Business Conduc e of prepared food	ied in Rhode Island Is and other related restaura	nt/deli items and any othe	r lawful business in Ri	node Island	
7. NAMES AND ADDRES	SES OF THE OFFI	CERS: ("X" BOX FOR ATTA	CHMENT) 📋 FILL IN SE	PACES BEFORE USING	ATTACHMENTS	
President Name			Vice President Name			
Dayna Mendolia			Philip Mendolia			
Street Address 34 Old Colony Road			Street Address 34 Old Colony Road			
City North Stonington	State CT	<sup>Zip</sup> 06359	City North Stonington	State CT	<sup>Zip</sup> 06359	
Secretary Name Philip Mendolia			Treasurer Name Philip Mendolia			
Street Address See above			Street Address See above			
City	State	Zip	City	State	Zip	
8. NAMES AND ADDRES	SES OF THE DIRE	CTORS: ("X" BOX FOR ATT	: TACHMENT) ☐ FILL IN	I SPACES BEFORE USIN	I NG ATTACHMENTS	
Director Name		-	Director Name			
Philip Mendolia						
Street Address		Street Address				
see above City	State	Zip	City	State	Zip	
Director Name	J		Director Name			
Street Address		Street Address				
City	State	Zip	City	State	Zip	
9. SHARES AUTHORIZE	p	I	10. SHARES ISSUED ISSUED SHARES — THIS SEC	-		
This information is automath, of record in the Office of the Secretary of			Number of Shares	Class/Scries	Par Value	
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.			600	common	.01par	
This report must be execu	uted on behalf of the	ne corporation by an authorize	Led representative. If the co	proporation is in the hand	ds of a receiver or trustee	
		e corporation by the receiver				
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File Date	<del>(1) () -</del>		Signatura	1200	1 2 (gm/ (i	
Check No.	1_(1)		Signature	!!_	Date	
By:			Philip Mendolia			
			Print or Type Name  Vice-President			
FOR SECRETARY O	F STATE USE ONLY		<b></b>	:III		
L			Title			