

A. Rulph Mollis, Secretary of State Corporations Division 148 W. River Street

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2010

Providence, RI 02904-2615 401.222.3040

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.

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1. Corporate ID No. 140460	2. Name of Corporation Metro Lobster & Seafood, Inc.					
3. Street Address Principal Business Office 8 New England Way			City Warwick	State RI	Zip 02886	
		5. State of Incorporation Rhode Island				
6. Brief Description of the Character of Business Conducted in Rhode Island			· · · · · · · · · · · · · · · · · · ·			
The purchase and sale of s			wful business			
		•		PS REPORT HEING ATT	A CELEBRATE	
President Name		R A HUAL UNION	CHMENT) TELL IN SPACES BEFORE USING ATTACHMENTS:			
Russell De Petrillo			Maria Dell Grotta			
Street Address			Street Address			
same as above			580 Seven Mile Road			
City	State	Zip	City	State	Zip	
			Hope	RI	02831	
Secretary Name Maria Dell Grotta			Treasurer Name Russell De Petrilio			
Street Address			: Street Address			
580 Seven Mile Road			same as above			
City Hope	State RI	<i>Z</i> _Ψ 02831	City	State	Zip	
8. NAMES AND ADDRESSES	OF THE DIRECTOR	S ("X" BOX FOR ATT	ACHMENT) FILL IN SPA	CES BEFORE USING A	TACHMENTS	
Director Name	***. 24 ·	¥1.	Director Name		3774 Mg 12 .	
Russell De Petrillo						
Street Address			Street Address			
same as above						
City	State	Zip	City	State	Zip	
Director Name	J	J	Director Name			
Director trame			Litector Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) 10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) 10. SHARES — THIS SECTION MUST BE COMPLETED						
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value	
1,000 Common No Par Value			200	Common	No Par Value	
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This report must be avacated			I I I I I I I I I I I I I I I I I I I		1	

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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FILE Date	49.
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Check NO.	18
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<i>B</i> y	
FOR SECRETARY OF STATE USE ONLY	34

Under penalty of perjury, I declare and affi	
including any accompanying schedules and contained herein are true and correct.	statements, and that all statements
mull all	2/02/19
Signature	Date
Russell De Petrillo	
Print or Type Name	
President	
Title	
	Form 630 Rev. 12/06