

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

	-1.2-1501(e), each corp	ng Fee: \$50.00* • THIS REPO poration failing or refusing to file its ann				
1. Corporate ID No. 67919		2. Name of Corporation PANADERIA EL QUETZAL INC				
3. Street Address Principal Business Office 445 HARTFORD AVE.			PROVIDENCE	State RI	<i>Zip</i> 02909-05131	
4. Business Phone No. 5. State of Incorporation RHODE ISLAND						
6. Brief Description of the Chara BAKERY & RESTAURA		icted in Rhode Island				
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTA President Name JOSE MARQUEZ			CHMENT)   FILL IN SPACES BEFORE USING ATTACHMENTS  Vice President Name  RICHARD GUERRA			
Street Address 16 MELISSA ST.			Street Address 16 MELISSA ST.			
PROVIDENCE	State RI	<sup>Ζφ</sup> 02909	PROVIDENCE	State RI	<sup>2ip</sup> 02909	
Secretary Name JOSE MARQUEZ			Treasurer Name RICHARD GUERRA			
Street Address 16 MELISSA ST.			Street Address 16 MELISSA ST.			
PROVIDENCE	State RI	<sup>Zip</sup> 02909	PROVIDENCE	State RI	<sup>Zip</sup> 02909	
8. NAMES AND ADDRES Director Name NONE	SES OF THE DIR	ECTORS: ("X" BOX FOR ATT	TACHMENT)   FILL IN Director Name NONE	SPACES BEFORE USING	G ATTACHMENTS	
Street Address			Street Address			
City	State	Zip	City	State	Zip	
Director Name NONE			Director Name NONE			
Street Address			Street Address			
Ciţv	State	Zip	Сиу	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			Number of Shares	Clas:/Series	Par Value	
State. Changes require a instruction sheet.	n additional filing	g. See Section 9 of	100	COMMON	NO PAR VALUE	
		he corporation by an authorize ne corporation by the receiver		orporation is in the hands	of a receiver or trustee,	
FILE	)			mpanying schedules and sta	hat I have examined this report tements, and that all statemen	

FILED	Under penalty of perjury, I declare and affirm that I have examined this repincluding any accompanying schedules and statements, and that all statem
File Date MAR 09 2010	contained herein are true and correct.  Signature  C3/06/11
FOR SECRETARY OF STATE USE ONLY	JOSE MARQUEZ  Print or Type Name  PRESIDENT
	Title Form 630 Rev. 08/08