

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.

I. Corporate ID No. 100271	2. Name of Corporation UNION FRUIT MARKET, INC.					
3. Street Address Principal Business Office 139 BROAD STREET			PAWTUCKET	State R.I.	<sup>Zip</sup> 02860	
4. Business Phone No. 5. State of Incorporation RHODE ISLAND A			AND PROVIDENCE PLANTATIONS			
6. Brief Description of the Character of Business Conducted in Rhode Island TO ENGAGE IN, OPERATE, MANAGE, AND/OR CONDUCT A GROCERY RETAIL SALES SERVICE BUSINESS						
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT)   FILL IN SPACES BEFORE USING ATTACHMENTS  President Name  ! Vice President Name						
BIRGILIO A. CABRAL			FENELA E. CABRAL			
Street Address 39 LUPINE AVENUE			Street Address 33 ARCH STREET			
PAWTUCKET	State R.I.	<sup>Zip</sup> 02860	City PAWTUCKET	State R.I.	<sup>Zip</sup> 02860	
Secretary Name JOSE M. CABRAL			Treasurer Name PEDRO MATEO			
Street Address 72 RILLEY STREET			Street Address 33 SWEET BRIAR AVENUE			
PAWTUCKET	State R.I.	<sup>Zip</sup> <b>0286</b> 0	City PAWTUCKET	State R.I.	<sup>Zip</sup> 02860	
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATT. Director Name			ACHMENT)  FILL IN SPACES BEFORE USING ATTACHMENTS  Director Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
Director Name	J	J	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	Class/Series	Par Value	
			600.00	STK	\$0.00	
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.  OCT 06 2010  Under penalty of perjury, I declare and affirm that I have examined this report including any accompanying schedules and statements, and that all statements						
File Date BY 1562			contained herein are		1 9/23/10	
Check No.			Signature(/	ΔΙ	Date ' I	
			Print or Type Name	JOSE CABRAL Print or Type Name		
By:			■ SECRETARY			
FOR SECRETARY OF STA	TE USE ONLY		Title		Form 630 Rev. 08/08	