

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street Providence, RI 02904-2615

401.222.3040

2011

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

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&rd)) is

subject to a penalty fee of \$25.00.	2-1501(e), each corporat	tion janung or rejusing to file its anno	uu report wirnin viiriy 1507 augs u	per we time preserioed by the	(R.I.O.I 7-1,2-1)01(LOB)
1 Corporate ID No. 108693	2. Name of Corporation PAWTUCKET ACQUISITION, INC.				
3. Street Address Principal Business Office 5 Benefit Street			Cuy Providence	State RI	7.ip 02904-0000
4. Business Phone No. 5. State of Incorporation RI					
6. Brief Description of the Characte to operate a donut s		d in Rhode Island			
7. NAMES AND ADDRESSI President Name	ES OF THE OFFICE	ERS: ("X" BOX FOR ATTA	Vice President Name		ATTACHMENTS
Carlos P. Andrade			Manuel P. Andrade		
Street Address 5 Fox Hollow Lane			Street Address 40 Carrie Avenue		
City Sharon	State MA	Zip 02067-	City East Providence	State RI	2ip 02916-
Secretary Name Manuel P. Andrade			Treasurer Name Carlos P. Andrade		
Street Address 40 Carrie Avenue			Street Address 5 Fox Hollow Lane		
East Providence	State RI	^{Zip} 02916-	City Sharon	State MA	^{Zip} 02067 -
8. NAMES AND ADDRESS! Director Name Carlos P. Andrade	es of the direc	TORS: (*X**BOX FOR ATT			ATTACHMENTS
Street Address 5 Fox Hollow Lane			Street Address 40 Carrie Avenue		
Sharon	State MA	Zip 02067-	City East Providence	State RI	Zip 02916-
Director Name none	· · · · · · · · · · · · · · · · · · ·		Director Name none		
Street Address none			Street Address none		
City none	State none	Zip none	City none	State none	Zip none
9. SHARES AUTHORIZED		, 社会的联系的对方。	10. SHARES ISSUED (ISSUED SHARES — THIS SECT	the contract of the contract o	IMENT) 🔲
This information is curren	information is currently of record in the Office of the Secretary of			Class/Series	Par Val ue
State. Changes require an additional filing. See Section 9 of instruction sheet.			100	Common	No Par
			THIS SECT	OF MISSES.	
		corporation by an authorize corporation by the receiver		poration is in the hand	s of a receiver or trustee

	FILED
File Date	4 984
Check No.	JAN VI ZUI
By	* 16 16
F	OR SECRETARY OF STATE USE ONLY

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

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01/03/2011

Carlos P. Andrade

Print or Type Name

President

Title

Form 630 Rev. 08/08