



State of Rhode Island  
and Providence Plantations  
Office of the Secretary of State

A. Ralph Mollis, Secretary of State  
Corporations Division  
148 W. River Street  
Providence, RI 02904-2611  
401.222.3041

**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2011**

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.

1. Corporate ID No. 38634	2. Name of Corporation Block Island Pharmacy, Ltd.
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3. Street Address Principal Business Office High Street	City Block Island	State RI	Zip 02807
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4. Business Phone No. 401-466-5825	5. State of Incorporation Rhode Island
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6. Brief Description of the Character of Business Conducted in Rhode Island  
To operate a health and general store

**7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT)  FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name Bennet I. Wohl			Vice President Name Kenneth Wohl		
Street Address Payne Road			Street Address 151 Kinderkamack Road		
City Block Island	State RI	Zip 02807	City Westwood	State NJ	Zip 07675
Secretary Name Toubé Wohl			Treasurer Name Bennet I. Wohl		
Street Address Payne Road			Street Address Payne Road		
City Block Island	State RI	Zip 02807	City Block Island	State RI	Zip 02807

**8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT)  FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name Bennet I. Wohl			Director Name Kenneth Wohl		
Street Address Payne Road			Street Address 151 Kinderkamack Road		
City Block Island	State RI	Zip 02807	City Westwood	State NJ	Zip 07675
Director Name Toubé Wohl			Director Name		
Street Address Payne Road			Street Address		
City Block Island	State RI	Zip 02807	City	State	Zip

**9. SHARES AUTHORIZED**  **10. SHARES ISSUED ("X" BOX FOR ATTACHMENT)**

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.	ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
	Number of Shares	Class/Series	Par Value
	200	A	No Par Value
THIS SECTION MUST BE COMPLETED			

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.

FILED

File Date FEB 04 2011

Check No. 15328

By: [Signature]

FOR 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.

[Signature] 1-26-11  
Signature Date

BENNET I. WOHL  
Print or Type Name

President  
Title