RI SOS Filing Number: 201174795550 Date: 02/11/2011 4:00 PM

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 02904-2615
401-222-3040

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(c), 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)(2)), subject to a penalty fee of $25.00.*

1. Corporate ID No.	2. Name of Corporation
17023	Hilltop Enterprises, Inc.

3. Street Address Principal Business Office	City	State	Zip
336 Dexter Street	Central Falls	RI	02863

4. Business Phone No.	5. State of Incorporation
(401) 726-9766	RI

6. Brief Description of the Character of Business Conducted in Rhode Island
COIN OP LAUNDRY / ICE MFG.

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

President Name	Street Address	City	State	Zip
Daniel Shannahan	8 Cullen Avenue	Lincoln	RI	02865

Vice President Name	Street Address	City	State	Zip
NONE				

Secretary Name	Street Address	City	State	Zip
NONE				

Treasurer Name	Street Address	City	State	Zip
Edward Shannahan	100 Progress Street	Lincoln	RI	02865

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

Director Name	Street Address	City	State	Zip
NONE				

Director Name	Street Address	City	State	Zip
NONE				

Director Name	Street Address	City	State	Zip
NONE				

9. SHARES AUTHORIZED

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.

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

ISSUED SHARES – THIS SECTION MUST BE COMPLETED

Number of Shares	Class Series	Par Value
200	COMMON	NONE

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.

[redacted] [redacted]

Under penalty of perjury, I declare and affirm that I have examined this report including any accompanying schedules and statements, and that all statement contained herein are true and correct.

Daniel Shannahan 2/9/2011
Signature *Date*

DANIEL SHANNAHAN
Print or Type Name

PRESIDENT
Title

[redacted]

File Date FILED
Check No. FEB 11 2011
By 6374
BY
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Form 630 Rev. 08/08