

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(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 benealty fee of \$25.00.

1. Corporate ID No. 159998		2. Name of Corporation Brothers Gas, Inc.				
3. Street Address Principal Business Office 317 N. Broadway			City Rumford	State RI	^{Zip} 02916	
4. Business Phone No. 401 434-3144 5. State of Incorporate Rhode Island						
6. Brief Description of the Cha Gasoline Service Stat	ion		ть веняяля, да городиялист органиялист	ottoda san angangti sa Jakifi Quragu 1980)		
entities. Committee of the second sec	SSES OF THE OFFIC	ERS; ("X" BOX FOR	ATTACHMENT) THE IN S	SPACES BEFORE USING	ATTACHMENTS	
President Name			Arz Succar			
Loubnon Succar			Street Address			
Street Address 11 Highview Avenue			11 Highview Avenue			
. Gity	State	Zip	City West Roxbury	State MA	21p 02132	
West Roxbury	MA	02132		IVICT	1.32.32	
Secretary Name Charlie Succar			Loubnon Succar	Treasurer Name Loubnon Succar		
Street Address			Street Address	:		
11 Highview Avenu	e		11 Highview Avenu	11 Highview Avenue		
City West Roxbury	State MA	^{Ζφ} 02132	Gity West Roxbury	State MA	^{Zιρ} 02132	
8. NAMES AND ADDR	ESSES OF THE DIREC	TORS: ("X" BOX FO	(R ATTACHMENT) 🗌 FILL I	N SPACES BEFORE USIN	G ATTACHMENTS	
Director Name Loubnon Succar			Director Name	Director Name		
			Arz Succar			
Street Address			11 Highview Avenu	Street Address		
11 Highview Avenu		710	City	State State	Zip	
City	State	^{Ζiρ} 02132	West Roxbury	MA	02132	
West Roxbury MA 02132 Director Name			Director Name			
Street Address			Street Address			
Gity .	State	Zip	City	State	Zip	
9. SHARES AUTHORIZ	LED ("X" BOX FOR	 TTACHMENT) □		(+X-BOX FOR ATTAC		
AUTHORIZED SHARES	-econtraria e e espesiales e estatela.			ECTION MUST BE COMPLETED		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value	
3000	Common	0.01	300	Common	0.01 	
			7.45 GE	eriji sija (S. s.	117.44.5	
This report must be ev	ecuted on hehalf of the	corporation by an au	nthorized representative. If the	corporation is in the hand	s of a receiver or trustee,	

this report must be executed on behalf of the corporation by the receiver or trustee.

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By BY_	14	'73	
	OR SECRETARY OF 5	TATE USE ONLY	

Under penalty of perjury, I declar including any accompanying sche contained herein are true and corr	e and affirm that I have examined this report, edules and statements, and that all statements rect.
Signature	Date
Loubnon Succar	
Print or Type Name	
President	
Title	Form 630 Rev. 12/06