

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 penalty fee of \$25.00.						
1. Corporate ID No. 40452	2. Name of Corporation TWEET'S FAMILY RESTAURANT, INC.					
3. Street Address Principal Business Office 180 Mt. Hope Avenue			Ctry Bristol	State RI	^{Ζip} 02809	
4. Business Phone No. 5. State of Incorporation (401) 253-9811 Rhode Island						
6. Brief Description of the Character of OPERATION OF RESTAUR	ANT					
7. NAMES AND ADDRESSES	OF THE OFFICERS:	("X" BOX FOR ATTAC	CHMENT) 🗍 FILL IN SPACE	S BEFORE USING ATTA	CHMENTS	
President Name	- 1	- many - graph of the section of the	Vice President Name		- The second sec	
Mildred Balzano			John A. Balzano			
			•			
Street Address 60 DeWolf Avenue			Street Address 205 Metacom Avenue			
City Bristol	State R1	<i>^{Zip}</i> 02809	City Bristol	State RI	^{Zip} 02809	
Secretary Name Mildred Balzano			Treasurer Name Mildred Balzano			
Street Address 60 DeWolf Avenue			Street Address 60 DeWolf Avenue			
City Bristol	State RI	^{Ztp} 02809	City Bristol	State RI	^{Zip} 02809	
8, NAMES AND ADDRESSES	OF THE DIRECTORS	C'X" BOX FOR ATT	ACHMENT) FILL IN SPA	CES BEFORE USING AT	TACHMENTS	
Director Name	A distribution of a property of the second o	The state of the s	Director Name			
Mildred Balzano			None			
Street Address		•	Street Address			
			•		+,	
60 DeWolf Avenue	· · · · · · · · · · · · · · · · · · ·	Y		1.		
City	State	Ζip	Cuy	State	Zip	
Bristol	RI	02809				
Director Name John A. Balzano			Director Name None			
Street Address			Street Address			
205 Metacom Avenue			1.			
City Bristol	State RI	^{Zip} 02809	City	State	Zip	
9. SHARES AUTHORIZED	A STAN STAN STAN STAN STAN STAN STAN STA	**************************************	10. SHARES ISSUED ("X"	BOX FOR ATTACHME	WT): I i i i i i i i i i i i i i i i i i i	
- · · · · · · · · · · · · · · · · ·			ISSUED SHARES — THIS SECTION	MUST BE COMPLETED		
			Number of Shares	Class/Series	Par Value	
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of			100	Common	No Par	
instruction sheet.						
			THE SECTION	2 2 X	1.002 \$ 500.00	
This report must be executed	on behalf of the corpo	oration by an authorize	d representative. If the corpor	ation is in the hands of a	receiver or trustee,	

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

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FOR	SECRETARY C	F STATE USE	ONIY

	Under penalty of perjury, I	declare and affirm that I have e	xamined this report,
	including any accompanyi	ng schedules and statements, ar	d that all statements
2.325	contained herein are true a	nyal correget.	1/2/
ter comments and	Meldre	Levano	188/11
	Signature	Date	7 7
	Mildred Balzand	50	
	Print or Type Name		
	President		
_	Title		

Form 630 Rev. 08/08