

2. Name of Corporation

La Esquina Market, Inc.

1. Corporate ID No.

3. Street Address Principal Business Office

486525

File Date

Check No.

FOR SECRETARY OF STATE USE ONLY

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.

3 Street Address Principal Business Office 272 Webster Avenue			City Providence	State RI	2tp 02909	
_ 401-946-5949		5. State of Incorporation Rhode Island	de Island			
6. Brief Description of the Co Grocery Market	haracter of Business Condu	cted in Rhode Island				
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTA President Name Pedro Gonzalez			ACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Vice President Name Liza Gonzalez			
Street Address 171 Laurens Street			Street Address 171 Laurens Street			
City Cranston	State RI	^{Zip} 02910	City Cranston	State RI	^{Zip} 02910	
Secretary Name Liza Gonzalez			Treasurer Name Pedro Gonzalez			
Street Address 171 Laurens Street			Street Address 171 Laurens Street			
City Cranston	State RI	^{Zip} 02910	City Cranston	State RI	^{Zip} 02910	
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATT Director Name Pedro Gonzalez Street Address 171 Laurens Street			TACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Director Name Liza Gonzalez Street Address 171 Laurens Street			
City	State	Zip	City	State		
Cranston	RI RI	02910	Cranston	RI	<i>^{Zip}</i> 02910	
None Name			Director Name None			
Street Address	· · · · · · ·		Street Address			
City	State	Zip	City	State	Zip	
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ISSUED SHARES — THIS SECTION MUST BE COMPLETED			
This information is currently of record in the Office of the Secretary of			Number of Shares	Class/Series	Par Value	
State. Changes requirinstruction sheet.	e an additional filing	See Section 9 of	200	common	\$.01	
This report must be exthis report must be exe	ecuted on behalf of the	ne corporation by an authorize e corporation by the receiver of	Or trustee. Under penalty of p	perjury, I declare and affirm	that I have examined this report	
C	II EN	`	contained berein a	nupanying schedules and st	atements, and that all statement	

Signature

Title

Pedro Gonzalez

Print or Type Name President