

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 subject to a penalty fee of \$25.00.	'-1501(e), each corpo	ration failing or refusing to file its ann	ual report within thirty (30) a	lays after the time prescribed by la	w (R.I.G.L. 7-1.2-1501(c&d)) is
1. Corporate ID No. 73542	2. Name of Corporation CENTRAL FRUIT STORE, INC.				
3. Street Address Principal Business Office c/o Joseph Raheb, Esq., 650 Washington Hwy.		City Lincoln	State RI	2ψ 02865	
4. Business Phone No. 5. State of Incorporation (401) 333-3377 RHODE ISLAND					
6. Brief Description of the Character Ownership and operation of		cted in Rhode Island			
	S OF THE OFFI	CERS: ("X" BOX FOR ATTA	. —	SPACES BEFORE USING	ATTACHMENTS
President Name George Kishfy			Vice President Name Craig Kishfy		
Street Address 213 Old River Road			Street Address 5 Monarch Way		
City Lincoln	State R1	^{Zip} 02865	City Lincoln	State RI	^{Zip} 0 2 865
Secretary Name Craig Kishfy			Treasurer Name Craig Kishfy		
Street Address 5 Monarch Way			Street Address 5 Monarch Way		
City Lincoln	State RI	^{Zip} 02865	City Lincoln	State RI	^{Zip} 02865
	S OF THE DIRE	ECTORS: ("X" BOX FOR ATT		N SPACES BEFORE USIN	G ATTACHMENTS
George Kishfy			Director Name Craig Kishfy		
Street Address 213 Old River Road			5 Monarch Way		SE 201
City	State	Zip	City	State	2.6 3 3 3 7 7 7 7
Lincoln Director Name	JRI	02865	Lincoln Director Name	RI	[02 96 5 cm/m
			2		
Street Address			Street Address		3 5 6 €
City	State	Zip	City	State	Zip 13. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.
9. SHARES AUTHORIZED	1	1		O ("X" BOX FOR ATTACA ECTION MUST BE COMPLETED	• —
This information is currently	v of record in th	ne Office of the Secretary of	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 instruction sheet.			200	Common	No Par Value
		ne corporation by an authorize e corporation by the receiver		corporation is in the hand	s of a receiver or trustee,
_					
			Under penalty of	perjury, I declare and affirm	that I have examined this i

	Section 2 Section 1999
File Date	A I have been been
Check No.	MAR 02 2011
By:	a 138918
1 20V	The state of the s
Tro	R SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm	that I have examined this report,
including any accompanying schedules and st	atements, and that all statements
contained herein are true and correct.	
Thomas froken	2-25-11
Signature CEURGE KISHFY	Date
Print or Type Name	
Title	Form 630 Rev. 08/08