



STATE OF RHODE ISLAND  
AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State

Matthew A. Brown, Secretary of State  
Corporations Division  
148 W. River St., 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

\* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation falling 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. 82761		2. Name of Corporation One-Stop Liquors, Inc.	
3. Street Address Principal Business Office 97 RAILROAD STREET		City MANVILLE	State RI
		Zip 02838	
4. Business Phone No. 4017691515	5. State of Incorporation RHODE ISLAND		
6. Brief Description of the Character of Business Conducted in Rhode Island TO SELL VARIOUS FORMS OF ALCOHOLIC BEVERAGES.			

**ADDRESSES OF THE OFFICERS (Do not use this space for attachments)**

President Name NECATI YUZBASIOGLU		Vice President Name NONE	
Street Address 3 JOYCE ANN DRIVE		Street Address	
City MANVILLE	State RI	City	State
		Zip 02838	
Secretary Name NECATI YUZBASIOGLU		Treasurer Name NECATI YUZBASIOGLU	
Street Address 3 JOYCE ANN DRIVE		Street Address 3 JOYCE ANN DRIVE	
City MANVILLE	State RI	City MANVILLE	State RI
		Zip 02838	

**ADDRESSES OF THE DIRECTORS (Do not use this space for attachments)**

Director Name NONE		Director Name	
Street Address		Street Address	
City	State	City	State
		Zip	
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
		Zip	

**FOR VOTING PURPOSES (Do not use this space for attachments)**

AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
100	NO PAR VALUE		100	COMMON	NO PAR

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.

**FILED**

MAR 01 2011

By 138768

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

NECATI YUZBASIOGLU Feb 28 2011  
Signature of Officer Date

Print or Type Name of Officer

**PRESIDENT**

Title of Officer

\*82761 DBC 01/23/06 04:59:05 PM\*

File Date \_\_\_\_\_

Check No. \_\_\_\_\_

By: \_\_\_\_\_

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