

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. I. 7-1.2-1501(c) each corporation failing or refusing to file its annual report within thirm (30) days after the time premished by law (R I G. I. 7-1.2-150).

subject to a penalty fee of \$25.00 1. Corporate ID No.	2. Name of Con	poration				
89964	Chelo's Wa	Chelo's Waterfront Bar & Grille, Inc.				
3. Street Address Principal Business Office 1725 Mendon Road			City Cumberland	State RI	02864	
4. Husiness Phone No.  312-6500  5. State of Incorporation Rhode Island						
6. Brief Description of the Chara restaurant	acter of Business Condu	cted in Rhode Island				
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTA President Name Glenn Chelo			ACHMENT) TILL IN SPACES BEFORE USING ATTACHMENTS  Vice President Name  Craig Chelo			
Street Address 5 Stoneridge Drive			Street Address  8 Burlingame Road			
City North Smithfield	State RI	<sup>Zip</sup> <b>028</b> 96	City Smithfield	State RI	<sup>Zip</sup> 02917	
Secretary Name Randy Chelo			Treasurer Name Gary Chelo			
Street Address 628 Snake Hill Road			Street Address 289 Robin Hollow Road			
cuy Scituate	State RI	<sup>Zip</sup> 02857	City West Greenwich	State RI	<i>Ζι</i> ρ <b>02817</b>	
8. NAMES AND ADDRES Director Name	SSES OF THE DIRE	ECTORS: ("X" BOX FOR AT	TTACHMENT) T FILL IN Director Name	SPACES BEFORE USIN	G ATTACHMENTS	
Street Address			Street Address			
City	State	Zip	City	State	Zip	
Director Name	***************************************	•••••••••••••••••••••••••••••••••••••••	Director Name			
Street Address			Street Address			
City	State	Zip	Сиу	Stale	Zip	
9. SHARES AUTHORIZE	D '	l	•	("X" BOX FOR ATTAC CTION <u>MUST</u> BE COMPLETED	- <b>-</b>	
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.			Number of Shares	Class/Series	Par Value	
			100	Common	no par value	

	FILED
File Date	
Check No.	MAR 0 2 2011
By: <b>BY_</b>	34373
	SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and a	
including any accompanying schedules	and statements, and that all statements
contained herein are true and correct.	1 1
10-12	2/22/11
Signature	Date
Glenn Chelo	
Print or Type Name	
Pfint or Type Name President	
Title	***************************************