

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. 2. Name of Corporation 89281 Olympia Tea Room, Inc. 3. Street Address Principal Business 74 Bay Street Westerly RI 02891 4. Business Phone No 5. State of Incorporation 401 348-8211 RΙ 6. Brief Description of the Character of Business Conducted in Rhode Island ownership and operation of a restaurant business and business property 7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT)  $\Box$  FILL IN SPACES BEFORE USING ATTACHMENTS President Name Vice President Name Marcia H. Felber none Street Address Street Address 8 Elm Street State City State Westerly Zip RI 02891 Secretary Name Marcia H. Felber Marcia H. Felber Street Address Street Address 8 Elm Street 8 Elm Street City Westerly State RI 02891 Westerly RΙ 02891 8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) [ FILL IN SPACES BEFORE USING ATTACHMENTS Director Name Marcia H. Felber Street Address Street Address 8 Elm Street City State Zip City State Ζip Westerly 02891 Director Name Director Name 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 require an additional filing. See Section 9 of 100 common no par instruction sheet. 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.

File Date	FILED
Check No.	MAR 02 2011
By: BY_FOR S	ECRETARY OF STATE USE ONLY

Under penalty of p including any acco contained herein a	ompanying schedules :	ffirm that I have examined and statements, and that all	this report, statements
Signature		Date	
Marcia H. Fe	elbe		
Print or Type Name			· · · · · · · · · · · · · · · · · · ·
President			
Title	· · · · · · · · · · · · · · · · · · ·		