



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

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. 148037		2. Name of Corporation SFT Donuts, Inc.			
3. Street Address Principal Business Office 1237 Kingstown Road			City South Kingstown	State R.I.	Zip 02879
4. Business Phone No. 401-739-9900		5. State of Incorporation R.I.			
6. Brief Description of the Character of Business Conducted in Rhode Island To provide coffee and pastries, wholesale and retail, allied services					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Charles Tsoumakas			Vice President Name Charles Tsoumakas		
Street Address 1 Alberta Drive			Street Address 1 Alberta Drive		
City Hope	State R.I.	Zip 02831	City Hope	State R.I.	Zip 02831
Secretary Name Sheila Tsoumakas			Treasurer Name Sheila Tsoumakas		
Street Address 1 Alberta Drive			Street Address 1 Alberta Drive		
City Hope	State R.I.	Zip 02831	City Hope	State R.I.	Zip 02831
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Charles Tsoumakas			Director Name Sheila Tsoumakas		
Street Address 1 Alberta Drive			Street Address 1 Alberta Drive		
City Hope	State R.I.	Zip 02831	City Hope	State R.I.	Zip 02831
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐		
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.			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
			Number of Shares 300	Class/Series Common	Par Value None

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

File Date MAR 21 2011

Check No. _____

By: BY J 84

FOR SECRETARY OF STATE USE ONLY

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.

Signature [Signature] Date 3/28/11

Charles Tsoumakas

Print or Type Name

President

Title