



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. 75256		2. Name of Corporation BREAKNECK FOOD CORPORATION			
3. Street Address Principal Business Office 40 Breakneck Hill Road			City Lincoln	State Rhode Island	Zip 02865
4. Business Phone No. (401) 725-8510		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island Full service restaurant					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name David E. Lahousse			Vice President Name Donna M. Lahousse		
Street Address 106 Ridge Street			Street Address 106 Ridge Street		
City Woonsocket	State Rhode Island	Zip 02895	City Woonsocket	State Rhode Island	Zip 02895
Secretary Name Robert L. Simmons			Treasurer Name David E. Lahousse		
Street Address 10 Nate Whipple Highway, Post Office Box 7366			Street Address 106 Ridge Street		
City Cumberland	State Rhode Island	Zip 02864	City Woonsocket	State Rhode Island	Zip 02895
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name David E. Lahousse			Director Name Donna M. Lahousse		
Street Address 106 Ridge Street			Street Address 106 Ridge Street		
City Woonsocket	State Rhode Island	Zip 02895	City Woonsocket	State Rhode Island	Zip 02895
Director Name None			Director Name None		
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 <u>MUST</u> BE COMPLETED		
			Number of Shares *200*	Class/Series Common	Par Value Without Par Value

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.

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 David E. Lahousse Date 1/2/11
David E. Lahousse
Print or Type Name
President
Title

File Date	FILED
Check No.	MAR 31 2011
By:	<u>CE 141572</u>
BY	
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