

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

* In accordance with R.I.G.L. 7-1.2-subject to a penalty fee of \$25.00.	March 1 • Filing Fee 1501(e), each corporation j	: \$50.00* • THIS REPORTAGE THE STREET	RT MUST BE TYPED O wal report within thirty (30) da	R PRINTED LEGIBLY IN ys after the time prescribed by law (BLACK INK. R.I.G.L. 7-1.2-1501(c&d)) is	
1. Corporate ID No. 115546	2. Name of Corporation DDL RESTAURANT, INC.					
3. Street Address Principal Business Office 1013 Cass Avenue			^{City} Woonsockekt	State Rhode Island	^{Zip} 02895	
4. Business Phone No. 5. State of Incorporation Rhode Island						
6. Brief Description of the Character Full service restaurant	of Business Conducted in 1	Rhode Island				
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTAC President Name David E. Lahousse			CHMENT) TILL IN SPACES BEFORE USING ATTACHMENTS 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			
Cury Cumberland	State Rhode Island	^Z ψ 02864	City Woonsocket	State Rhode Island	^{Zip} 02895	
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATT. Director Name David E. Lahousse			ACHMENT) TILL IN SPACES BEFORE USING ATTACHMENTS 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	<i>Ζψ</i> 02895	
None			Director Name None			
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 State. Changes require an additional filing. See Section 9 of instruction sheet.			Number of Shares	Class/Series	Par Value	
			100	Common	Without Par Valu	
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.						
FIL	ED]		erjury, I declare and affirm tha mpanying schedules and stater re true and correct.		

Г	FILED				
	File Date MAR 3 1 2011				
	Check No				
	FOR SECRETARY OF STATE USE ONLY				

Under penalty of perjury, I declare and affiring any accompanying schedules and contained herein are true and correct.	
James E Thousa	Date
David E. Lahousse	
Print or Type Name	
President	
Title	Form 630 Rev. 08/08
	. 0.11. 00/00