

File Date

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FOR SECRETARY OF STATE USE ONLY

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. 000158144	2. Name of Corporation PABLO & JUAN JIMENEZ, EL BOMBAZO MARKET INC.				
3. Street Address Principal Business Office 981 BROAD STREET			PROVIDENCE	State R	^{Zip} 02907
		5. State of Incorporation RHODE ISLAND			
6. Brief Description of the Character of GROCERY STORE			3.3.3.3.2.3.3.3.3.3.3.3.3.3.3.3.3.3.3.3		
7. NAMES AND ADDRESSES President Name	OF THE OFFICERS:	("X" BOX FOR ATTA	CHAIENT) THILLIN SP	ACES BEFORE USING	ATTACHMENTS
PABLO JIMENEZ			JUAN JIMENEZ		
Street Address 74 BARROWS ST			Street Address 65 KINFIELD ST		
PROVIDENCE	State RI	^{Zip} 02909	PROVIDENCE	State RI	^{Zip} 02909
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	Cîty	State	Zip
S. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTAC Director Name			ACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
Gity .	State	Zip	City	State	Zip
9. SHARES AUTHORIZED 10. SHARES ASSUED (*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
			1000	CNP	0.00
			· 1996年 新春春	" "	
This report must be executed this report must be executed of	on behalf of the corpo	oration by an authorize tration by the receiver o	d representative. If the color trustee.	rporation is in the hand	ds of a receiver or trustee,
			including any accord	manying schedules and s	that I have examined this report tatements, and that all statement
			contained herein are	true and correct.	1 1

JUAN JIMENEZ Print or Type Name

Title

VICE PRESIDENT