

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

2011 PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

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(cord)) is subject to a penalty fee of \$25.00. 2. Name of Corporation BASIL'S PIZZA, INC. 1. Corporate ID No. 2035 *ோ* Cranston Street Address Principal Business Office RI 02920 1441 Park Avenue 5 State of Incorporation 4 Business Phone No 401-943-1800 Rhode Island 6. Brief Description of the Character of Business Conducted in Rhode Island Operation of a restaurant. 7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) 🔲 FILL IN SPACES BEFORE USING ATTACHMENTS Vice President Name President Name Basilios K. Tsimikas Basilios K. Tsimikas Street Address 1270 Cranston Street 1270 Cranston Street City Stair 02920 RI 02920 Cranston RΙ Cranston Treasurer Name Basilios K. Tsimikas Basilios K. Tsimikas Street Address Street Address 1270 Cranston Street 1270 Cranston Street Cin **02920** RΙ 02920 RI Cranston Cranston 8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) [] FILL IN SPACES BEFORE USING ATTACHMENTS Director Name None Basilios K. Tsimikas Street Address Street Address 1270 Cranston Street State Ζip City State City 02920 Cranston Director Name Director Name None None Street Address Street Address State City Zip City 10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) 9. SHARES AUTHORIZED ISSUED SHARES - THIS SECTION MUST BE COMPLETED Par Value Number of Shares This information is currently of record in the Office of the Secretary of No Par Value State. Changes require an additional filing. See Section 9 of 100 Common 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, ceiver or trustee. this report must be executed on behalf of the corp Under penalty of perjury, I declare and affirm that I have examined this report, SEP 29 2011 including any according anying schedules and statements, and that all statements ontained herein are thye and correct. Signature Basilios K. Tsimikas Check No.

> Print or Type Name President

Title