

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(cc²rd)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 127569	2. Name of Corporation IZZO BROS. FARM, INC.				
3. Street Address Principal Business Office 2141 Plainfield Pike			Johnston	State RI	<i>Zip</i> 02919
4. Business Phone No. 5. State of Incorporation Rhode Island					
6. Brief Description of the Character of Business Conducted in Rhode Island To buy, sell, export and import, to raise and produce all kinds of farm a finerate greenhouse farms, clairies far the OFFICERS: ("X" BOX FOR ATTAC					
Street Address 2141 Plainfield Pike			Street Address 2141 Plainfield Pike		
City Johnston	State RI	^{Zip} 02919	City Johnston	State RI	7.tp 02919
Secretary Name Carlo J. Izzo			Treasurer Name Carlo J. Izzo		
Street Address 2141 Plainfield Pike			Street Address 2141 Plainfield Pike		
<i>City</i> Johnston	State RI	^{கழ்} 02919	Gity Johnston	State RI	02919
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATT Director Name Carlo J. Izzo Street Address			ACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Director Name None Street Address		
2141 Plainfield Pike City Johnston Director Name	State RI	Zip 02919	City Director Name	State	Zip
None Street Address			None 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			Number of Shares	Class/Series	Par Value
State. Changes require an additional filing. See Section 9 of instruction sheet.			200	Common	No Par Value
This report must be executed this report must be executed of	on behalf of the corpo	oration by an authorize ration by the receiver of	or trustee. Under penalty of	perjury, I declare and affirm t	that I have examined this report
File Date	7 2011		Carlo J. Izz Print or Type Nam President	are true and confect.	Itements, and that all statement 10 - 5 - 1 Date
TOR SECRETARI OF STA			Title		Form 630 Rev. 08/08