RI SOS Filing Number: 201288115800 Date: 01/17/2012 4:00 PM

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 2012

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.	2. Name of Corporation			
9932	Mendon Foods Corp.			
3. Street Address Principal Business Office		City	State	Zip
1800 Post Road-17G Airport Plaza		Warwick	RI	02886
4. Business Phone No.	5. State of Incorporation			
(401)738-1321	Rhode Island			

6. Brief Description of the Character of Business Conducted in Rhode Island
Food Service

7. NAMES AND ADDRESSES OF THE OFFICERS: ***("X" BOX FOR ATTACHMENT)*** ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name			Vice President Name		
Vacant			Edward A. Carosi		
Street Address			Street Address		
			77 Wyndham Avenue		
City	State	Zip	City	State	Zip
			Providence	RI	02908
Secretary Name			Treasurer Name		
Vacant			L. Neil Leroy		
Street Address			Street Address		
			137 Club Course Drive		
City	State	Zip	City	State	Zip
			Hilton Head Isles	SC	29928

8. NAMES AND ADDRESSES OF THE DIRECTORS: ***("X" BOX FOR ATTACHMENT)*** ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name			Director Name		
Edward A. Carosi					
Street Address			Street Address		
77 Wyndham Avenue					
City	State	Zip	City	State	Zip
Providence	RI	02908			
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip

9. SHARES AUTHORIZED

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.

10. SHARES ISSUED ***("X" BOX FOR ATTACHMENT)*** ☐

ISSUED SHARES — THIS SECTION MUST BE COMPLETED

Number of Shares	Class/Series	Par Value
300	xCommonx	No Par
	THIS SECTION MUST BE COMPLETED	

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.

[redacted]

FILED
File Date JAN 17 2012
Check No. 18520
By:
FOR SECRETARY OF STATE USE ONLY

72165-16-686478

[redacted]

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 *Date* 1-9-12

Edward A. Carosi
Print or Type Name

[redacted] Vice President
Title

Form 630 Rev. 08/08