



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Matthew A. Brown, Secretary of State
Corporations Division
148 W. River St.
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*

* 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. 94475		2. Name of Corporation JITTERS CAFE INC.			
3. Street Address Principal Business Office 530 Tower Hill Road			City North Kingstown	State RI	Zip 02852
4. Business Phone No. 295-9155		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island the operation of a coffee and related items.					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Susan Osbrey			Vice President Name Raymond G. Osbrey III		
Street Address 307 Plain Road			Street Address 307 Plain Road		
City West Greenwich	State RI	Zip 02817	City West Greenwich	State RI	Zip 02817
Secretary Name Raymond G. Osbrey III			Treasurer Name Susan Osbrey		
Street Address 307 Plain Road			Street Address 307 Plain Road		
City West Greenwich	State RI	Zip 02817	City West Greenwich	State RI	Zip 02817
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Susan Osbrey			Director Name		
Street Address 307 Plain Road			Street Address		
City West Greenwich	State RI	Zip 02817	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
800	common	no par value	100	common	no par value

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.

FILED

File Date JAN 18 2012
 Check No. 16574
 By: _____
 FOR SECRETARY OF STATE USE ONLY

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 Susan Osbrey Date 1/10/12
 SUSAN OSBREY
 Print or Type Name
 PRESIDENT
 Title