



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 02904-2611
401.222.3044

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. 87650		2. Name of Corporation TENARES SUPERMARKET, INC.	
3. Street Address Principal Business Office 484 CRANSTON STREET		City PROVIDENCE	State RI
		Zip 02907	
4. Business Phone No. (401) 453-5710		5. State of Incorporation RHODE ISLAND	

6. Brief Description of the Character of Business Conducted in Rhode Island
TO OPERATE, MANAGE AND CONDUCT A GENERAL GROCERY STORE

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

President Name LUIS A. FERMIN			Vice President Name CARLOS M. FERMIN		
Street Address 9 FENNER STREET			Street Address 184 WEBSTER AVENUE		
City CRANSTON	State RI	Zip 02910	City PROVIDENCE	State RI	Zip 02909
Secretary Name CARLOS M. FERMIN			Treasurer Name LUIS A. FERMIN		
Street Address 184 WEBSTER AVENUE			Street Address 9 FENNER STREET		
City PROVIDENCE	State RI	Zip 02909	City CRANSTON	State RI	Zip 02910

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

Director Name NONE			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip

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

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.	ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
	Number of Shares	Class/Series	Par Value
	600	STK	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 23 2012**

Check No. **4342**

BY: **[Signature]**

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] 1-20-12
Signature Date

LUIS A. FERMIN
Print or Type Name

PRESIDENT
Title