

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. subject to a penalty fee of \$25.		pration failing or refusing to file its ann	ual report within thirty (30)	days after the time prescribed by lau	o (R.I.G.L. 7-1.2-1501(c&d)) is	
1, Corporate ID No. 48084		2. Name of Corporation BOB-KEN, INC.				
3. Street Address Principal Business Office 556 Central Avenue			City Pawtucket	State RI	^{Zip} 02861	
4. Business Phone No. 5. State of Incorporation (401) 725-2580 Rhode Island		5. State of Incorporation Rhode Island				
6. Brief Description of the Cha RETAIL SALE OF FO						
	ESSES OF THE OFFI	CERS: ("X" BOX FOR ATTA	· •	SPACES BEFORE USING A	ATTACHMENTS	
President Name Kenneth C. Munschy			Vice President Name Kenneth C. Munschy			
Street Address 18 Joyce Ann Drive			Street Address 18 Joyce Ann Drive			
^{City} Manville	State RI	^{Zip} 02838	City Manville	State RI	02838	
Secretary Name Kenneth C. Munschy			Treasurer Name Kenneth C. Munschy			
Street Address 18 Joyce Ann Drive			Street Address 18 Joyce Ann Drive			
Cuy Manville	State RI	^{Zip} 02838	City Manville	State RI	^{Zip} 02838	
8. NAMES AND ADDRI Director Name None	ESSES OF THE DIRE	ECTORS: ("X" BOX FOR ATT	ACHMENT) FILL	IN SPACES BEFORE USING	G ATTACHMENTS	
Street Address			Street Address			
City	State	Zip	City	State	Zip	
Director Name			Director Name			
Street Address			Street Address			
City	State	Zip	Сйу	State	Zip	
9. SHARES AUTHORIZ	ED I	ı		I D <i>("X" BOX FOR ATTACH</i> SECTION <u>MUST</u> BE COMPLETED	I IMENT) [
This information is cur	rently of record in the	he Office of the Secretary of	Number of Shares	Class/Series	Par Value	
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.			200	соммон	NO PAR VALUE	
		he corporation by an authorize e corporation by the receiver		corporation is in the hands	of a receiver or trustee,	
	FILED			perjury, I declare and affirm the		

This report must be executed on behalf of the corporation by this report must be executed on behalf of the corporation by t	an authorized representative. If the corporation is in the hands of a receiver or trustee, the receiver or trustee.
FILED	Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements and that all statements
File Date JAN 2 7 2012	contained herein are knowned earliery
Check No. By 2227	Kenneth C. Munschy Print or Type Name President
FOR SECRETARY OF STATE USE ONLY	Title Form 630 Rev. 08/08