

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street

Providence, RI 02904-2615 401.222.3040

2012

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 B.I.G.I. 7-1.2-1501(s) and corporation failing or reflecting to file its annual report within thirm (30) days after the time prescribed by law (B.I.G.I. 7-1.2-150).

* In accordance with R.I.G.L. 7-1.2-1; subject to a penalty fee of \$25.00.	501(e), each corporation	a failing or refusing to file its annu	al report within thirty (30) days after	the time prescribed by law	(R.I.G.L. /-1.2-1501(cod)) is
1. Corporate ID No. 5659	2. Name of Corporation D & D DONUTS, INC.				
3. Street Address Principal Business Office 1755 Smith Street			North Providence	State RI	2ip 02911-0000
4. Business Phone No. (401) 949-0337		5. State of Incorporation RI			
6. Brief Description of the Character of to operate a donut shop	Business Conducted in	n Rhode Island			
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTAC President Name Demetrius D. Sampalis			CHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Vice President Name Valerie B. Sampalis		
Street Address 11 Betsy Williams Circle			Street Address 11 Betsy Williams Circle		
Johnston (City Johnst	State RI	^{Ζφ} 02919 -	City Johnston	State RI	Zip 02919-
Secretary Name Valerie B. Sampalis			Treasurer Name Demetrius D. Sampalis		
Street Address 11 Betsy Williams Circle			Street Address 11 Betsy Williams Circle		
City Johnston	Siale RI	^{Zip} 02919-	^{City} Johnston	State RI	^{Zip} 02919-
8. NAMES AND ADDRESSES Director Name Demetrius D. Sampalis		ORS: ("X" BOX FOR ATT	ACHMENT) FILL IN SPA Director Name Valerie B. Sampalis	CES BEFORE USING	ATTACHMENTS
Street Address 11 Betsy Williams Circle			Street Address 11 Betsy Williams Circle		
City Johnston	State RI	21p 02919-	City Johnston	State RI	2ip 02919-
Director Name none			Director Name none		
Street Address none			Street Address none		
City none	State none	z _{ip} none	City none	State none	zip none
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 State. Changes require an additional filing. See Section 9 of instruction sheet.			Number of Shares	Class/Series	Par Value
			100	Common	No Par
This report must be executed this report must be executed or				ration is in the hands	of a receiver or trustee,

	FILED			
File Date	JAN 3 1 2012			
Check No	33335			
FOR SECRETARY OF STATE USE ONLY				

Under penalty of perjury, I decla including any accompanying set contained herein are true and co	nedules and statements,	•
Deslun Ec	en le	01/02/2012
Signature	Da	ite
Demetrius D. Sampalis		
Print or Type Name		
President		
Title	-	Form 630 Rev. 08/08
	1.	OLIIL ODO INCY, 00/00