



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. 000572748		2. Name of Corporation PRINCESS + SONS TWO INC	
3. Street Address Principal Business Office 1153 PUTNAM PIKE			City CHAPACTET
4. Business Phone No. (401) 568-4700		State R.I.	Zip 02814
5. State of Incorporation RHODE ISLAND			
6. Brief Description of the Character of Business Conducted in Rhode Island PIZZA PASTRY + OTHER ITEMS HOT + COLD BEV.			
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name JORDAN SMITH		Vice President Name JOSHUA SMITH	
Street Address 11 JAMES ST		Street Address 48 DOUGLASS AVE CIRCLE	
City GREENVILLE	State R.I.	Zip 02828	City GREENVILLE
Secretary Name LEE SMITH		Treasurer Name	
Street Address 11 JAMES ST.		Street Address	
City GREENVILLE	State R.I.	Zip 02828	City
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
Director Name JORDAN SMITH		Director Name	
Street Address 11 JAMES ST.		Street Address	
City GREENVILLE	State R.I.	Zip 02828	City
Director Name		Director Name	
Street Address		Street Address	
City	State	Zip	City
9. SHARES AUTHORIZED			
10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			
ISSUED SHARES — THIS SECTION MUST BE COMPLETED			
Number of Shares 400	Class/Series COMMON	Par Value NO 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.			

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: FEB 21 2012
Check No.: 334
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: Jordan Smith Date: 1-29-12
Print or Type Name: JORDAN SMITH
Title: PRESIDENT