



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State - Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

2013

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

Filing Period: January 1 - March 1 • This report must be typed or printed legibly.

Filing Fee: \$50.00 • FAILURE TO FILE THIS REPORT BY MARCH 31 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. 87656		2. Exact name of the Corporation 144 & BROADWAY FOOD CENTER INC.		
3. Principal office address 249 Webster Ave		City Providence	State R.I	Zip 02909
4. Business Phone No. 401-275-6694		5. State of Incorporation R.I		
6. Brief description of the character of business conducted in Rhode Island To maintain, operate, lease, own and conduct a wholesale and retail food store or supermarket				
President Name Euclides Grullon		Vice-President Name Ramon Rodriguez		
Street Address 101 Lexington Ave		Street Address 101 Lexington Ave		
City Providence	State R.I	Zip 02907	City Providence	State R.I
Secretary Name Euclides Grullon		Treasurer Name Ramon Rodriguez		
Street Address 101 Lexington ave		Street Address 101 Lexington Ave		
City Providence	State R.I	Zip 02907	City Providence	State R.I
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>				
Director Name N/A Close Corporation		Director Name		
Street Address		Street Address		
City	State	Zip	City	State
Director Name		Director Name		
Street Address		Street Address		
City	State	Zip	City	State
9. SHARES AUTHORIZED		10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
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
		1000	COMMON	\$1.00/shares

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

JAN 07 2013

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.

01/07/2013

File Date

Check No

By:

BY

180925
DS

Signature of Authorized Representative

Date

Euclides Grullon President

Print or Type Name of Authorized Representative