

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

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. Littity ID NO.	E. LAGUITIAIN	e of the Corporation				
67228	PORTS	PORTSMOUTH DONUTS, INC.				
3. Principal office address 3070 East Main Road			City Portsmouth	State R1	Zip 02871-0000	
4. Business Phone No. (401) 683-9832			5. State of Incorporation RI			
6. Brief description of the char to operate a donut fra		conducted in Rhode Island				
A STATE OF THE STA	e en la grande de la companya de la La companya de la co	grand in the state of the state				
President Name Arthur J. Medeiros			Vice-President Name David Medeiros			
Street Address			Street Address			
235 Robinson Street			147 King Phillip Road			
City	State	Zip	City	State	Zip	
East Providence	RI	02914-	Seekonk	MA	02771-	
Secretary Name David Medeiros			Treasurer Name Arthur J. Medeiros			
Street Address			Street Address			
147 King Phillip Road			235 Robinson Street			
City Seekonk	State M A	Zip 02771-	City East Providen	state RI	Zip 02914-	
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Director Name			Director Name			
Arthur J. Medeiros			David Medeiros			
Street Address			Street Address			
235 Robinson Street	1		147 King Phil			
City East Providence	State	Zip	City	State MA	Zip	
	RI	02914-	3771132111		02771-	
Director Name none			Director Name			
Street Address			Street Address			
none			none			
City	State	Zip	City State		Zip	
none	none	none	none	none	none	
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing.			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	
			200	Common	No Par	
See Section 9 of instruction	sheet					
This report must be executed	d on behalf of the	corporation by an authorize	d representative. If the	corporation is in the hand	ds of a receiver or trustee,	

this report must be executed on behalf of the corporation by the receiver or trustee.

FILED

FEB 0 8 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.

2013

Signature of Authorized Representative

1/07/2013

Date

Arthur J. Medeiros

Tint or Type Name of Authorized Representative

President

Form No. 630 Revised: 01/2012