



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 2013

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. 12244		2. Exact name of the Corporation SMITHFIELD DONUTS, INC.			
3. Principal office address 385 Putnam Pike			City Smithfield	State RI	Zip 02917-0000
4. Business Phone No. (401) 231-3080			5. State of Incorporation RI		
6. Brief description of the character of business conducted in Rhode Island to operate a donut franchise					
President Name Manuel S. Andrade			Vice-President Name Jose M. Dutra		
Street Address 1955 Westminster Street			Street Address 199 Rumstick Road		
City Providence	State RI	Zip 02909-	City Barrington	State RI	Zip 02806-
Secretary Name Jose M. Dutra			Treasurer Name Manuel S. Andrade		
Street Address 199 Rumstick Road			Street Address 1955 Westminster Street		
City Barrington	State RI	Zip 02806-	City Providence	State RI	Zip 02909-
Director Name Manuel S. Andrade			Director Name Jose M. Dutra		
Street Address 1955 Westminster Street			Street Address 199 Rumstick Road		
City Providence	State RI	Zip 02909-	City Barrington	State RI	Zip 02806-
Director Name none			Director Name none		
Street Address none			Street Address none		
City none	State none	Zip none	City none	State none	Zip none
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 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 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.

FEB 28 2013

1/07/2013

Signature of Authorized Representative

Date

BY

7377

Manuel S. Andrade

Jose Dutra

Print or Type Name of Authorized Representative

V. President