



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. 140460		2. Exact name of the Corporation Metro Lobster & Seafood, Inc.			
3. Principal office address 8 New England Way			City Warwick	State RI	Zip 02886
4. Business Phone No. 401-737-5250		5. State of Incorporation Rhode Island			
6. Brief description of the character of business conducted in Rhode Island The purchase and sale of shellfish and other seafood and any other lawful business.					
President Name Russell De Petrillo			Vice-President Name Maria Dell Grotta		
Street Address same as above			Street Address 580 Seven Mile Road		
City	State	Zip	City	State	Zip
			Hope	RI	02831
Secretary Name Maria Dell Grotta			Treasurer Name Russell De Petrillo		
Street Address 580 Seven Mile Road			Street Address same as above		
City	State	Zip	City	State	Zip
Hope	RI	02831			
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) (SEE BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name Russell De Petrillo			Director Name		
Street Address same as above			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED (SEE 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	
200		Common		No Par Value	

2013 MAR 12 PM 12:35
 SECRETARY OF STATE
 CORPORATIONS DIV

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
 MAR 12 2013
 BY *[Signature]*
 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] 1/18/13
 Signature of Authorized Representative Date
Russell De Petrillo, President
 Print or Type Name of Authorized Representative

BY *[Signature]*
 29-192391