



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 2013

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. 65457		2. Name of Corporation Manville Palace Pizza, Inc.			
3. Street Address Principal Business Office 141 Railroad Street			City Manville	State RI	Zip 02838
4. Business Phone No. 401-769-9777		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island Pizza Restaurant					
7. NAMES AND ADDRESSES OF THE OFFICERS (SEE BOX FOR ATTACHMENTS) FILE IN SPACES BEFORE USING ATTACHMENTS					
President Name Ozan Sonmez			Vice President Name Tarkan Akin		
Street Address 220 Crossings Drive			Street Address 2 Regency Plaza		
City Cumberland	State RI	Zip 02864	City Providence	State RI	Zip 02903
Secretary Name Tarkan Akin			Treasurer Name Ozan Sonmez		
Street Address 2 Regency Plaza			Street Address 220 Crossings Drive		
City Providence	State RI	Zip 02903	City Cumberland	State RI	Zip 02864
8. NAMES AND ADDRESSES OF THE DIRECTORS (SEE BOX FOR ATTACHMENTS) FILE IN SPACES BEFORE USING ATTACHMENTS					
Director Name			Director Name		
Street Address			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 ATTACHMENTS) FILE IN SPACES BEFORE USING ATTACHMENTS					
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.			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
			Number of Shares	Class/Series	Par Value
			100	Common	No Par Value
THIS SECTION MUST BE COMPLETED					

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.

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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

Tarkan Akin

Print or Type Name

Vice President

Title

04/15/13
Date

