	State of Rhode Island and Pro	evidence Dientetiene					
RALINOIL	Office of the Secret						
Division Of Business Services							
v	148 W. River S						
Science 510	Providence RI 02904-2615 (401) 222-3040						
	· · ·						
Business Corpora Annual Report	tion						
Filing Period: January 1	- March 1						
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.							
ANNUAL REPORT YEAR: 2014							
1. Corporate ID No. 000094825							
2. Name of Corporation <u>ALFIE'S VARIETY, INC.</u>							
3. Street Address Principal Business Office:							
No. and Street: 8	8 WINNAPAUG ROAD						
City or Town: <u>V</u>	<u>VESTERLY</u> Sta	ate: <u>RI</u> Zip: <u>02891</u> Country: <u>USA</u>					
4. Business Phone No.							
<u>596-4788</u>							
5. State of Incorporation							
State: <u>RI</u>	State: <u>RI</u>						
6. Brief Description of the Character of Business Conducted in Rhode Island							
o. Bhe beschption of the onaracter of business conducted in Anode Island							
TO ENGAGE IN OP	PERATING VARIETY STORES RE	STAURANTS AND AMUSEMENT					
TO ENGAGE IN OPERATING VARIETY STORES, RESTAURANTS AND AMUSEMENT EMPORIUMS.							
7. Names and Addresses of the Officers and Directors:							
7. Names and Addres							
	rectors must be listed. If officers and, longer applicable; please delete.	/or directors have been elected, the title					
		···· 1					
Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country					
TREASURER	GARY S. FIORE	88 WINNAPAUG RD.					
		WESTERLY, RI 02891 USA					
SECRETARY	GARY S FIORE	WINNAPAUG ROAD WESTERLY, RI 02891 USA					
PRESIDENT	GARY S FIORE	88 WINNAPAUG ROAD					
		WESTERLY, RI 02891 USA					
DIRECTOR	GARY S FIORE	88 WINNAPAUG ROAD					

	WESTERLY, RI 02891 USA						
8. Shares Authorized and Issued							
Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares Number of Shares	Total Issued and Outstanding <i>Num of</i> <i>Shares</i>			
CNP		\$0.0000	8,000.00	100			
 9. 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. Signed this 28 Day of January, 2014 at 11:40:15 AM. This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2. By <u>GARY S. FIORE</u> Signature of Authorized Representative of the Corporation <u>PRESIDENT</u> Title This report cannot be accepted for filing if an officer has executed the form and he/she is not listed in section 7. 							
Revised 09/07							
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