



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

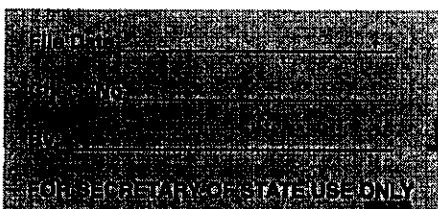
## PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR **2014**

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. <b>92722</b>		2. Exact name of the Corporation <b>GABRIEL'S TIGER MART, INC.</b>			
3. Principal office address <b>69 TAUNTON AVENUE</b>		City <b>EAST PROVIDENCE</b>		State <b>RI</b>	Zip <b>02914</b>
4. Business Phone No. <b>4014380854</b>		5. State of Incorporation <b>RHODE ISLAND</b>			
6. Brief description of the character of business conducted in Rhode Island <b>TO OPERATE A GASOLINE AND AUTOMOTIVE SERVICE STATION AND CONVENIENCE STORE.</b>					
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) (X) BOX FOR ATTACHMENT <input type="checkbox"/>					
President Name <b>GABRIEL PACHECO</b>			Vice-President Name <b>MARY LOU PACHECO</b>		
Street Address <b>69 TAUNTON AVENUE</b>			Street Address <b>69 TAUNTON AVENUE</b>		
City <b>EAST PROVIDENCE</b>	State <b>RI</b>	Zip <b>02914</b>	City <b>EAST PROVIDENCE</b>	State <b>RI</b>	Zip <b>02914</b>
Secretary Name <b>GABRIEL PACHECO</b>			Treasurer Name <b>MARY LOU PACHECO</b>		
Street Address <b>69 TAUNTON AVENUE</b>			Street Address <b>69 TAUNTON AVENUE</b>		
City <b>EAST PROVIDENCE</b>	State <b>RI</b>	Zip <b>02914</b>	City <b>EAST PROVIDENCE</b>	State <b>RI</b>	Zip <b>02914</b>
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) (X) BOX FOR ATTACHMENT <input type="checkbox"/>					
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			10. SHARES ISSUED (X) 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
			100	COMMON	\$0.00

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**

**JUN 12 2014**

**9388**

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.

*Gabriel Pacheco* 6-10-14  
Signature of Authorized Representative Date

**GABRIEL PACHECO**

Print or Type Name of Authorized Representative