



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 2015

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. 100692		2. Name of Corporation 904 Boston Neck, Inc.			
3. Street Address Principal Business Office 904 Boston Neck Road			City Narragansett	State RI	Zip 02882
4. Business Phone No.		5. State of Incorporation RHODE ISLAND			
6. Brief Description of the Character of Business Conducted in Rhode Island The sale of coffee, donuts and any other lawful purpose					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Robert S. Batista			Vice President Name Claudio Amaral		
Street Address 75 Tipping Rock Drive			Street Address 14 Mallard Way		
City East Greenwich	State RI	Zip 02818	City East Greenwich	State RI	Zip 02818
Secretary Name David Batista			Treasurer Name Theresa Amaral		
Street Address 30 Severn Court			Street Address 14 Mallard Way		
City East Greenwich	State RI	Zip 02818	City East Greenwich	State RI	Zip 02818
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Robert S. Batista			Director Name Claudio Amaral		
Street Address Same as above			Street Address Same as above		
City	State	Zip	City	State	Zip
Director Name David Batista			Director Name Theresa Amaral		
Street Address Same as above			Street Address Same as above		
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.			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
			Number of Shares 300	Class/Series Common	Par Value 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

JAN 26 2015

File Date _____
Check No. _____
By: _____
FOR SECRETARY OF STATE USE ONLY

BY 006657

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 _____ Date 1/16/15
Robert S. Batista
Print or Type Name
President
Title