

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

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PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2015

Filing Period: January 1 - March 1 - This report must be typed or printed legibly.

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1. Entity ID No.	2. Exact name o				, , , , , , , , , , , , , , , , , , ,
23179	THE LI	QUOR SHOPP	E, INC.		
3. Principal office address			City	State	Zip
155 Broad Street			Pawtucket	В т	02860
4. Business Phone No.			5. State of Incorporat	tion	<u> </u>
401-723-233			Rhode Isl	and	
i. Brief description of the charac	ater of business con	ducted in Rhode Islar	nd ·		
3					, e
President Name			Vice-President Name		<u> </u>
Domenic T. H	Perri. Jr.		Elaine Fe	anni	
Street Address			Street Address		
35 Betty Pond Road			l Deer Run		
City	State	Zip	City	State	Zip
Scituate,	R. I.	02831	Scituate	R .	02831
Secretary Name			Treasurer Name		02001
Elaine Ferri			Domenic T. Ferri. Jr.		
treet Address			Street Address	CTTT OT -	
l Deer Run			35 Betty Pond Road		
ity	State	Zip	City	State	Zip
Scituate	R. I.	02831	Scituate	R.	·
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irector Name			Director Name		
Domenic T. Ferri, Jr. Greet Address			Elaine Ferri Street Address		
ity	State	Zip	City	State	Zip
Scituate	R. I.	02831	Scituate	R. I	02831
rector Name			Director Name		<u> </u>
street Address			Street Address		- 1\1.
			01.001.1201000		
ity	State	Zip	City	State	Zip
2000 NO PAR VALUE his information is currently of record in the Office of the Secretary State. Changes require an additional filling. se Section 9 of instruction sheet.			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
			2000	COMMON	WITHOUT
his report must be executed on	behalf of the corpor	ration by an authorize executed on behalf of	the corporation by the re	orporation is in the hands iceiver or trustee. rjury, I declare and affirr	·

FILED

this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Authorized Representative

25 15 Date

Domenic Ferri, Jr.
Print or Type Name of Authorized Representative

Form No. 630 Revised: 01/2012