



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Matthew A. Brown, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 92100
2. Name of Corporation Joy-Po Food Corp.
3. Street Address Principal Business Office 323 WELLINGTON AVENUE
City CRANSTON State RI Zip 02910
4. Business Phone No. 4014679710
5. State of Incorporation RHODE ISLAND
6. SIC Code 638
7. Brief Description of the Character of Business Conducted in Rhode Island
TO MANUFACTURE, WHOLESALE, RETAIL AND DISTRIBUTE FOOD AND BEVERAGE.

8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name Lai Lee Chin			Vice President Name Tina L. Sawyer		
Street Address 125 Federal Street			Street Address 20 Ponagansett Avenue		
City	State	Zip	City	State	Zip
Providence	RI	02903	Warwick	RI	02888
Secretary Name Lai Lee Chin			Treasurer Name Tina L. Sawyer		
Street Address 125 Federal Street			Street Address 20 Ponagansett Avenue		
City	State	Zip	City	State	Zip
Providence	RI	02903	Warwick	RI	02888

9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name Lai Lee Chin			Director Name Tina L. Sawyer		
Street Address 125 Federal Street			Street Address 20 Ponagansett Avenue		
City	State	Zip	City	State	Zip
Providence	RI	02903	Warwick	RI	02888
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip

10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)

AUTHORIZED SHARES	Class Series	Par Value
Number of Shares		
2,000	NO PAR VALUE	

11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)

ISSUED SHARES	Class Series	Par Value
Number of Shares		
2,000		None

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



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92100 DBC 08/11/04 12:24:56 PM

File Date 8-26-04

Check No. 2387

By: LC

FOR SECRETARY OF STATE USE ONLY

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.

Lai Lee Chin 8/20/04
Signature of Officer Date
Lai Lee Chin
Print or Type Name of Officer
President
Title of Officer