



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 2005**

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 142900		2. Name of Corporation Freedom by the Sea, Inc.			
3. Street Address Principal Business Office 15 Links Passage			City Westerly	State RI	Zip 02891
4. Business Phone No.		5. State of Incorporation RHODE ISLAND			6. SIC Code
7. Brief Description of the Character of Business Conducted in Rhode Island TO OPERATE A RESTAURANT					
<b>8. NAMES AND ADDRESSES OF THE OFFICERS (EX BOX FOR ATTACHMENT) <input type="checkbox"/> FILE IN SPACES BEFORE USING ATTACHMENTS</b>					
President Name Kris G. Federico			Vice President Name		
Street Address 15 Links Passage			Street Address		
City Westerly	State RI	Zip 02891	City	State	Zip
Secretary Name Danielle A. Federico			Treasurer Name Danielle A. Federico		
Street Address 15 Links Passage			Street Address 15 Links Passage		
City Westerly	State RI	Zip 02891	City Westerly	State RI	Zip 02891
<b>9. NAMES AND ADDRESSES OF THE DIRECTORS (EX BOX FOR ATTACHMENT) <input type="checkbox"/> FILE IN SPACES BEFORE USING ATTACHMENTS</b>					
Director Name None			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
<b>10. SHARES AUTHORIZED (EX BOX FOR ATTACHMENT) <input type="checkbox"/> 11. SHARES ISSUED (EX BOX FOR ATTACHMENT) <input type="checkbox"/></b>					
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
8,000 COMM	\$.01 PAR VALUE		200.00	Common Stock	\$.01

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



\*142900 DBC 03/16/05 10:28:14 AM\*  
File Date 4-15-05  
Check No. 707  
By: ac  
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.

Danielle A. Federico 4/12/05  
Signature of Officer Date  
Danielle A. Federico  
Print or Type Name of Officer  
Secretary  
Title of Officer