



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 2016

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. 145766 | | 2. Exact name of the Corporation BUTCHER BLOCK MEATS, LTD | | | |
| 3. Principal office address 25 Village Plaza Way | | City North Scituate | State RI | Zip 02857-0000 | |
| 4. Business Phone No. | | 5. State of Incorporation RI | | | |
| 6. Brief description of the character of business conducted in Rhode Island to operate a supermarket business | | | | | |
| 7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> | | | | | |
| President Name Mark G. Brigido | | | Vice-President Name none | | |
| Street Address 35 Timberland Drive | | | Street Address none | | |
| City Lincoln | State RI | Zip 02865- | City none | State none | Zip none |
| Secretary Name Mark G. Brigido | | | Treasurer Name Mark G. Brigido | | |
| Street Address 35 Timberland Drive | | | Street Address 35 Timberland Drive | | |
| City Lincoln | State RI | Zip 02865- | City Lincoln | State RI | Zip 02865- |
| 8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> | | | | | |
| Director Name Mark G. Brigido | | | Director Name Bruce J. Brigido | | |
| Street Address 35 Timberland Drive | | | Street Address 35 Timberland Drive | | |
| City Lincoln | State RI | Zip 02865- | City Lincoln | State RI | Zip 02865- |
| Director Name Lee Ann Brigido | | | Director Name none | | |
| Street Address 35 Timberland Drive | | | Street Address none | | |
| City Lincoln | State RI | Zip 02865- | City none | State none | Zip none |
| 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 | 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.

File Date _____

Check No _____

By: _____

FOR SECRETARY OF STATE USE ONLY

Form No. 630
Revised: 01/2012

FILED

JAN 12 2016

BY

HL 5037

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.

Mark G. Brigido
Signature of Authorized Representative

1/04/2016
Date

Mark G. Brigido

Print or Type Name of Authorized Representative
President