



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. 130648		2. Exact name of the Corporation Elmwood Liquors, Inc.			
3. Principal office address 801 Elmwood Avenue		City Providence	State RI	Zip 02907	
4. Business Phone No. 401-785-3944		5. State of Incorporation Rhode Island			
6. Brief description of the character of business conducted in Rhode Island To conduct and engage in the business of buying, selling and dealing in all kinds of liquors and liquor products					
LIST ALL OFFICERS, OFFICES AND ADDRESSES (BY CITY, STATE AND ZIP) <input type="checkbox"/>					
President Name Jacqueline M. Kheng			Vice-President Name		
Street Address 2 Alexander Drive			Street Address		
City West Warwick	State RI	Zip 02893	City	State	Zip
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name Jacqueline M. Kheng			Director Name		
Street Address 2 Alexander Drive			Street Address		
City West Warwick	State RI	Zip 02893	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
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.			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
			1000	Common	No Par Value

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

FILED
 JAN 14 2016

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.

Jacqueline M. Kheng 01-12-16
 Signature of Authorized Representative Date

Jacqueline M. Kheng
 Print or Type Name of Authorized Representative

BY KLB