RI SOS Filing Number: 201693181650 Date: 02/25/2016 4:00 PM

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.	2. Exact name of the Corporation
75922	**RJ'S HILL LIQUORS, INC.**

3. Principal office address	City	State	Zip
2440 Mendon Road	**Cumberland**	**RI**	**02864**

4. Business Phone No.	5. State of Incorporation
(401) 658-0786	**Rhode Island**

6. Brief description of the character of business conducted in Rhode Island
To own, manage and operate a liquor store and to buy, sell, and deal in liquor and beverages.

LIST ALL OFFICERS (NAMES AND ADDRESSES) ☐

President Name	Vice-President Name
Kristine M. Lambert	**None**
Street Address: **2440 Mendon Road**	Street Address:
City: **Cumberland** State: **RI** Zip: **02864**	City: State: Zip:
Secretary Name: **Kristine M. Lambert**	Treasurer Name: **Kristine M. Lambert**
Street Address: **2440 Mendon Road**	Street Address: **2440 Mendon Road**
City: **Cumberland** State: **RI** Zip: **02864**	City: **Cumberland** State: **RI** Zip: **02864**

LIST ALL DIRECTORS (NAMES AND ADDRESSES) ☐

Director Name	Director Name
Kristine M. Lambert	
Street Address: **2440 Mendon Road**	Street Address:
City: **Cumberland** State: **RI** Zip: **02864**	City: State: Zip:
Director Name	Director Name
Street Address	Street Address
City: State: Zip:	City: State: Zip:

SHARES AUTHORIZED ☐

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.

[redacted]

FILED
FEB 25 2016
BY 3912

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.

Kristine M Lambert Pres 2-23-16
Signature of Authorized Representative Date

Kristine M. Lambert, President
Print or Type Name of Authorized Representative

Form No. 630
Revised: 01/2012

133063-49-1112863