



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. 111495		2. Exact name of the Corporation ALBUQUERQUE LIQUORS, LTD.			
3. Principal office address 10 Jones Street		City Cumberland	State RI	Zip 02864	
4. Business Phone No. 401-726-9632		5. State of Incorporation Rhode Island			
6. Brief description of the character of business conducted in Rhode Island To own and operate an establishment for the dispensing and sale of alcoholic beverages and other related products.					
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name Joseph Albuquerque			Vice-President Name NONE		
Street Address 10 Jones Street			Street Address		
City Cumberland	State RI	Zip 02864	City	State	Zip
Secretary Name Joseph Albuquerque			Treasurer Name Joseph Albuquerque		
Street Address 10 Jones Street			Street Address 10 Jones Street		
City Cumberland	State RI	Zip 02864	City Cumberland	State RI	Zip 02864
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name Joseph Albuquerque			Director Name NONE		
Street Address 10 Jones Street			Street Address		
City Cumberland	State RI	Zip 02864	City	State	Zip
Director Name NONE			Director Name NONE		
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
			100	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

FEB 28 2016

BY M268916

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.

Signature of Authorized Representative

Date

Joseph Albuquerque

Print or Type Name of Authorized Representative