



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. 3410 | | 2. Exact name of the Corporation CALISE & SONS BAKERY, INC. | | | |
| 3. Principal office address 2 QUALITY DRIVE | | City LINCOLN | State RI | Zip 02865 | |
| 4. Business Phone No. 4013343334 | | 5. State of Incorporation Rhode Island | | | |
| 6. Brief description of the character of business conducted in Rhode Island BAKING, BUYING AND SELLING IN BAKERY AND BREADS. | | | | | |
| 7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> | | | | | |
| President Name Michael R. Calise | | | Vice-President Name | | |
| Street Address 14 Katelan Court | | | Street Address | | |
| City Cranston | State RI | Zip 02921 | City | State | Zip |
| Secretary Name Peter Petrocelli | | | Treasurer Name Peter Petrocelli | | |
| Street Address 22 Westwood Road | | | Street Address 22 Westwood Road | | |
| City Lincoln | State RI | Zip 02865 | City Lincoln | State RI | Zip 02865 |
| 8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> | | | | | |
| Director Name Michael R. Calise | | | Director Name Robert L. Calise | | |
| Street Address 64 Claudia Drive | | | Street Address 46 Connors Farm Drive | | |
| City Cranston | State RI | Zip 02921 | City Smithfield | State RI | Zip 02917 |
| Director Name Michael R. Calise | | | Director Name Richard Sullivan | | |
| Street Address 14 Katelan Court | | | Street Address 144 Westminster Street | | |
| City Cranston | State RI | Zip 02921 | City Providence | State RI | Zip 02903 |
| 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 |
| | | | 200 | Common | No Par Voting |
| | | | 1000 | Common | No Par Non-Voting |

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
MAR 16 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.
 Signature of Authorized Representative: *Peter Petrocelli* Date: *3-12-16*
Peter Petrocelli
 Print or Type Name of Authorized Representative

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