



State of Rhode Island and Providence Plantations  
**Department of State - Business Services Division**

Annual Report for the year: **2017**

Corporation

- Filing period: January 1 - March 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by April 1.

|  |   |   |                    |
|--|---|---|--------------------|
| 1. Entity ID Number<br><b>1661594</b>  |   | 2. Exact name of the Corporation<br><b>178 ATWELLS AVENUE ENTERPRISES, INC.</b> |                    |
| 3. Principal Office Address<br><b>178 ATWELLS AVENUE</b>   |   | City<br><b>PROVIDENCE</b>   | State<br><b>RI</b> |
|  |   | Zip<br><b>02909</b>   |                    |
| 4. NAICS Code<br><b>81 - Other Services (except <input type="checkbox"/>)</b>  | 6. Brief description of the character of business conducted in Rhode Island<br><b>TO ENGAGE IN ANY BUSINESS PERMITTED CORPORATIONS UNDER THE ACT<br/>TO OPERATE AND MANAGE A CIGAR LOUNGE, RESTAURANT<br/>&amp; RELATED SERVICES (RETAIL)</b> |   |                    |
| 5. State of Incorporation<br><b>RI</b>   |   |   |                    |
| 7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>   |   |   |                    |
| President Name<br><b>ANTHONY C. MEROLA II</b>  |   | Vice-President Name<br><b>ANTHONY C. MEROLA II</b>                              |                    |
| Street Address<br><b>178 ATWELLS AVENUE</b>  |   | Street Address<br><b>178 ATWELLS AVENUE</b>                                     |                    |
| City<br><b>PROVIDENCE</b>  | State<br><b>RI</b>  | City<br><b>PROVIDENCE</b>   | State<br><b>RI</b> |
| Zip<br><b>02909</b>  |   | Zip<br><b>02909</b>   |                    |
| Secretary Name<br><b>WILLIAM C. DIMITRI</b>  |   | Treasurer Name<br><b>ANTHONY C. MEROLA II</b>                                   |                    |
| Street Address<br><b>178 ATWELLS AVENUE</b>  |   | Street Address<br><b>178 ATWELLS AVENUE</b>                                     |                    |
| City<br><b>PROVIDENCE</b>  | State<br><b>RI</b>  | City<br><b>PROVIDENCE</b>   | State<br><b>RI</b> |
| Zip<br><b>02909</b>  |   | Zip<br><b>02909</b>   |                    |
| 8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input checked="" type="checkbox"/></span>   |   |   |                    |
| Director Name<br><b>NONE</b>   |   | Director Name   |                    |
| Street Address   |   | Street Address  |                    |
| City   | State   | City  | State              |
| Zip  |   | Zip   |                    |
| Director Name  |   | Director Name   |                    |
| Street Address   |   | Street Address  |                    |
| City   | State   | City  | State              |
| Zip  |   | Zip   |                    |
| 9. Shares Authorized <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>   |   |   |                    |
| This information is currently of record in the Department of State.<br><br>Changes require an additional filing.   |   | 10. Shares Issued   |                    |
|  |   | NUMBER OF SHARES  | CLASS/SERIES       |
|  |   | <b>1000</b>   | <b>COMMON</b>      |
|  |   | PAR VALUE   |                    |
|  |   | <b>NONE</b>   |                    |
| 11. 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.<br><b>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.</b> |   |   |                    |
| Name of Authorized Representative<br><b>ANTHONY C. MEROLA II, PRESIDENT</b>  |   |   | Date               |
| Signature of Authorized Representative<br><i>Anthony C. Merola II</i>  |   |   | <b>2-6-17</b>      |

MAIL TO:  
 Division of Business Services  
 148 W. River Street, Providence, Rhode Island 02904-2615  
 Phone: (401) 222-3040  
 Website: www.sos.ri.gov

**FILED**  
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