



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 **2017**

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. 83362		2. Exact name of the Corporation Walt's Roast Beef International, Inc.			
3. Principal office address 680 Reservoir Avenue			City Cranston	State RI	Zip 02910
4. Business Phone No. 401-785-2530			5. State of Incorporation Rhode Island		
6. Brief description of the character of business conducted in Rhode Island To acquire by purchase, lease or otherwise, and to own, operate and maintain a business for the purpose of being a franchiser of Walt's Roast Beef restaurants.					
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name Glen Miguel			Vice-President Name Raymond D. Perrotta		
Street Address 8 Oxpull Road			Street Address 680 Reservoir Avenue		
City Carolina	State RI	Zip 02812	City Cranston	State RI	Zip 02910
Secretary Name Glen Miguel			Treasurer Name Raymond D. Perrotta		
Street Address 8 Oxpull Road			Street Address 680 Reservoir Avenue		
City Carolina	State RI	Zip 02812	City Cranston	State RI	Zip 02910
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name Raymond D. Perrotta			Director Name Glen Miguel		
Street Address 680 Reservoir Avenue			Street Address 8 Oxpull Road		
City Cranston	State RI	Zip 02910	City Carolina	State RI	Zip 02812
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
			400	COMMON	NO PAR

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

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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

Glen Miguel, President

Print or Type Name of Authorized Representative