



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

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SECRETARY OF STATE  
CORPORATIONS DIV

2018 FEB -2 PM 12:12

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 <b>814354</b>		2. Exact name of the Corporation <b>BPHIQUERS INC</b>			
3. Principal Office Address <b>87 TRIMTOWN RD</b>			City <b>N. SCITUATE</b>	State <b>RI</b>	Zip <b>02857</b>
4. NAICS Code <b>445310</b>		6. Brief description of the character of business conducted in Rhode Island <b>LIQUOR STORE</b>			
5. State of Incorporation <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 <b>BENJAMIN A. PHILLIPS</b>			Vice-President Name <b>MARY F. PHILLIPS</b>		
Street Address <b>87 TRIMTOWN RD</b>			Street Address <b>87 TRIMTOWN RD</b>		
City <b>N. SCITUATE</b>	State <b>RI</b>	Zip <b>02857</b>	City <b>N. SCITUATE</b>	State <b>RI</b>	Zip <b>02857</b>
Secretary Name <b>BENJAMIN A. PHILLIPS</b>			Treasurer Name <b>MARY F. PHILLIPS</b>		
Street Address <b>87 TRIMTOWN RD</b>			Street Address <b>87 TRIMTOWN RD</b>		
City <b>N. SCITUATE</b>	State <b>RI</b>	Zip <b>02857</b>	City <b>N. SCITUATE</b>	State <b>RI</b>	Zip <b>02857</b>
8. List ALL directors (names and addresses) <span style="float:right">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name <b>BENJAMIN A. PHILLIPS</b>			Director Name <b>MARY F. PHILLIPS</b>		
Street Address <b>87 TRIMTOWN RD</b>			Street Address <b>87 TRIMTOWN RD</b>		
City <b>N. SCITUATE</b>	State <b>RI</b>	Zip <b>02857</b>	City <b>N. SCITUATE</b>	State <b>RI</b>	Zip <b>02857</b>
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized			10. Shares Issued <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.  Changes require an additional filing.			NUMBER OF SHARES <b>2000</b>		
			CLASS/SERIES <b>0.01</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. <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 <b>BENJAMIN A. PHILLIPS</b>			Date <b>2/2/18</b>		
Signature of Authorized Representative 			SIGN DOCUMENT HERE <b>FEB 02 2018</b>		

BY 323320

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