RI SOS Filing Number: 201859065260 Date: 2/23/2018 4:00:00 PM

State of Rhode Island and Department of Sta			vision				
Annual Report for the year Corporation					SECRE CORPO 2018 FEB		
 → Filing period: January 1 - M → Filing Fee: \$50.00 → Penalty: Additional \$25.00 fe 		ed by April 1.				RECE RETAR) RPORAT	
Entity ID Number	2. Exact name of	Exact name of the Corporation					
157722	Marvic Ente	erprises Inc.					
3. Principal Office Address 199 Taunton Avenue			City East Providence		State RI	33 Zip 33 029174	
4. NAICS Code	6. Brief description	scription of the character of business conducted in Rhode Island					
445310	Liquor store						
5. State of Incorporation Rhode Island							
7. List ALL officers (names and add	resses)				ne box to in	idicate an attachment 🔲	
President Name Marco A. Pacheco	Vice-President Name Jose E. Silva						
Street Address 199 Taunton Avenue	Street Address 199 Taunton Avenue						
City East Providence	State RI	^{Zip} 02914	City East Provid		State RI	^{7₁p} 02914	
Secretary Name Marco A. Pacheco Street Address			Treasurer Name Marco A. Pacheco				
199 Taunton Avenue			Street Address 199 Taunton Avenue				
City East Providence	Stale RI	^{2ip} 02914	City East Providence		State RI	^{7₁p} 02914	
List ALL directors (names and ad Director Name	ldresses)		Director Name	Check th	ne box to in	ndicate an attachment 🔲	
thrector Marrie							
Street Address			Street Address				
City	State	Zıp	City		State	Zip	
Director Name	<u></u>		Director Name				
Street Address	Street Address						
City	State	Zıp	City		State	Zip	
9. Shares Authorized		10. Shares Issue				ie box to indicate an attachment	
This information is currently of recor Department of State.	d in the NUMBER OF S		Common		\$.01		
Changes require an additional filing.							
 This report must be executed or trustee, this report must be execute 	d on behalf of the	corporation by the	e receiver or truste	ee.			
Under penalty of perjury, I declar statements, and that all statemen	nts contained her			uding any accomp		chedules and	
Name of Authorized Representative Marco A. Pacheco, President	•		Date 2	119/18			
Signature of Authorized Representa	ative	SIGN DOCL	MENTILLED		1	, ,,,	
MAIL TO:		·	FEB 2 3 201	8		. .	
Division of Business Services 148 W. River Street, Providence, Rhode Phone: (401) 222-3040 Website: www.sos.ri.gov	Island 02904-2615	BY,	A 17	73	FC	ORM 630 - Revised: 10/201	