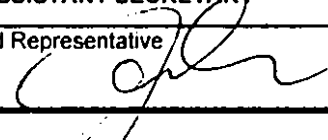




State of Rhode Island and Providence Plantations
Department of State - Business Services Division

Annual Report for the year: **2018**
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 24419		2. Exact name of the Corporation 7-ELEVEN, INC.												
3. Principal Office Address 3200 HACKBERRY ROAD			City IRVING	State TX	Zip 75063									
4. NAICS Code 445110		6. Brief description of the character of business conducted in Rhode Island RETAIL CONVENIENCE STORES												
5. State of Incorporation TX														
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐														
President Name JOSEPH M. DEPINTO			Vice-President Name DAVID SELTZER											
Street Address 3200 HACKBERRY ROAD			Street Address 3200 HACKBERRY ROAD											
City IRVING	State TX	Zip 75063	City IRVING	State TX	Zip 75063									
Secretary Name RANKIN GASAWAY			Treasurer Name DAVID SELTZER											
Street Address 3200 HACKBERRY ROAD			Street Address 3200 HACKBERRY ROAD											
City IRVING	State TX	Zip 75063	City IRVING	State TX	Zip 75063									
8. List ALL directors (names and addresses) Check the box to indicate an attachment ☐														
Director Name JOSEPH M. DEPINTO			Director Name JAY W. CHAI											
Street Address 3200 HACKBERRY ROAD			Street Address 3200 HACKBERRY ROAD											
City IRVING	State TX	Zip 75063	City IRVING	State TX	Zip 75063									
Director Name			Director Name											
Street Address			Street Address											
City	State	Zip	City	State	Zip									
9. Shares Authorized			10. Shares Issued Check the box to indicate an attachment ☐											
This information is currently of record in the Department of State. Changes require an additional filing.			<table border="1"> <thead> <tr> <th>NUMBER OF SHARES</th> <th>CLASS/SERIES</th> <th>PAR VALUE</th> </tr> </thead> <tbody> <tr> <td>111,891,066</td> <td>COMMON</td> <td>\$.0001</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	111,891,066	COMMON	\$.0001			
			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE									
111,891,066	COMMON	\$.0001												
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. 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.														
Name of Authorized Representative JAMES C. BAKER, ASSISTANT SECRETARY					Date 02/19/2018									
Signature of Authorized Representative 														

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
FEB 27 2018
BY 0212492308
OS
FORM 630 - Revised: 10/2017