



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

STAMP

FOR

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 144408		2. Exact name of the Corporation MI SUENO, INC												
3. Principal Office Address 1070 BROAD STREET			City PROVIDENCE	State RI	Zip 02905									
4. NAICS Code -722511		6. Brief description of the character of business conducted in Rhode Island TO OPERATE A RESTAURANT WITH LIVE AND DJ ENTERTEINMENT												
5. State of Incorporation RHODE ISLAND														
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>														
President Name JESUS TITIN			Vice-President Name SAME											
Street Address 1070 BROAD STREET			Street Address											
City PROVIDENCE	State RI	Zip 02905	City	State	Zip									
Secretary Name SAME			Treasurer Name SAME											
Street Address			Street Address											
City	State	Zip	City	State	Zip									
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>														
Director Name JESUS TITIN			Director Name											
Street Address 1070 BROAD STREET			Street Address											
City PROVIDENCE	State RI	Zip 02905	City	State	Zip									
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 <input type="checkbox"/>												
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>600</td> <td>NO PAR VALUE</td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>				NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	600	NO PAR VALUE				
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600	NO PAR VALUE													
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 JESUS TITIN					Date 03/01/2018									
Signature of Authorized Representative <i>Jesus M Titin</i>														
SIGN DOCUMENT HERE					FILED									

MAR 12 2018