



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 2012

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. 000667213		2. Exact name of the Corporation HTTM ENTERPRISES, INC.			
3. Principal office address 28 CLARKE STREET			City JAMESTOWN	State RI	Zip 02835
4. Business Phone No. 401-294-0800			5. State of Incorporation RHODE ISLAND		
6. Brief description of the character of business conducted in Rhode Island RESTAURANT					
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name HENRY R. TARBOX III			Vice-President Name HENRY R. TARBOX III		
Street Address 28 CLARKE STREET			Street Address 28 CLARKE STREET		
City JAMESTOWN	State RI	Zip 02835	City JAMESTOWN	State RI	Zip 02835
Secretary Name HENRY R. TARBOX III			Treasurer Name HENRY R. TARBOX III		
Street Address 28 CLARKE STREET			Street Address 28 CLARKE STREET		
City JAMESTOWN	State RI	Zip 02835	City JAMESTOWN	State RI	Zip 02835
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name HENRY R. TARBOX III			Director Name		
Street Address 28 CLARKE STREET			Street Address		
City JAMESTOWN	State RI	Zip 02835	City	State	Zip
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.					
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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.

Henry Tarbox III 3/20/13
 Signature of Authorized Representative Date

HENRY R. TARBOX III
 Print or Type Name of Authorized Representative