



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State

Matthew A. Brown, Secretary of State

Corporations Division
100 North Main Street
Providence, RI 02903-1335
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

Form with sections for Corporate ID No., Name of Corporation, Street Address, Business Phone No., State of Incorporation, SIC Code, Brief Description of Business, Names and Addresses of Officers (President, Vice President, Secretary, Treasurer), Names and Addresses of Directors, Shares Authorized, and Shares Issued.

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 6 3 4 1 4 *

Box for Secretary of State use containing File Date (2-27-09), Check No. (12757), and By (LUP).

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.

Signature of Officer: Glenn D. Allen, Date: 2/26/09

Print or Type Name of Officer: GLENN D. ALLEN

Title of Officer: PRESIDENT



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003

Filing Period: January 1-March 1 • Filing Fee: \$50.00



(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. **63414** 2. Name of Corporation **ALLEN'S WINE & SPIRITS, INC.**
3. Street Address Principal Business Office **3001 East Main Road** City **Portsmouth** State **RI** Zip **02871**
4. Business Phone No. **(401) 683-4030** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **3251**
7. Brief Description of the Character of Business Conducted in Rhode Island
Retail sale of authorized beverages, goods, wares and merchandise authorized under Title 3 of the Rhode Island General Laws.

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name Glenn D. Allen	Vice President Name None
Street Address 3001 East Main Road	Street Address
City Portsmouth State RI Zip 02871	City State Zip
Secretary Name Glenn D. Allen	Treasurer Name Glenn D. Allen
Street Address 3001 East Main Road	Street Address 3001 East Main Road
City Portsmouth State RI Zip 02871	City Portsmouth State RI Zip 02871

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name None	Director Name
Street Address	Street Address
City State Zip	City State Zip
Director Name	Director Name
Street Address	Street Address
City State Zip	City State Zip

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES		
Number of Shares	Class/Series	Par Value
4,000 COMM NO PAR VALUE		

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES		
Number of Shares	Class/Series	Par Value
100	Common	No par value

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 6 3 4 1 4 *

File Date: 3-3-03
Check No.: 11835
By: ICP

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.

Glenn D. Allen 2/27/03
Signature of Officer Date
GLENN D. ALLEN
Print or Type Name of Officer
PRESIDENT
Title of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002
Filing Period: January 1-March 1 • Filing Fee: \$50.00



(FORM MUST BE TYPED) IN BLACK)

1. Corporate ID No. **63414** 2. Name of Corporation **ALLEN'S WINE & SPIRITS, INC.**
3. Street Address Principal Business Office **3001 East Main Road** City **Portsmouth** State **RI** Zip **02871**
4. Business Phone No. **(401) 683-4030** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **3251**
7. Brief Description of the Character of Business Conducted in Rhode Island **Retail sale of authorized beverages, goods, wares and merchandise authorized under Title 3 of the Rhode Island General Laws.**

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name Glenn D. Allen	Vice President Name None
Street Address 3001 East Main Road	Street Address
City Portsmouth State RI Zip 02871	City State Zip
Secretary Name Glenn D. Allen	Treasurer Name Glenn D. Allen
Street Address 3001 East Main Road	Street Address 3001 East Main Road
City Portsmouth State RI Zip 02871	City Portsmouth State RI Zip 02871

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name None	Director Name
Street Address	Street Address
City State Zip	City State Zip
Director Name	Director Name
Street Address	Street Address
City State Zip	City State Zip

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value
4,000 COMM NO PAR VALUE		

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES

Number of Shares	Class/Series	Par Value
100	Common	No par value

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 6 3 4 1 4 *

File Date: 1-17-02
Check No.: 10878
By: [Signature]

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

[Signature] 1/17/02
Signature of Officer Date

GLENN D. ALLEN
Print or Type Name of Officer

PRESIDENT
Title of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **63414** 2. Name of Corporation **ALLEN'S WINE & SPIRITS, INC.**
 3. Street Address Principal Business Office City State Zip
3001 EAST MAIN RD. **PORTSMOUTH** **RI** **02871**
 4. Business Phone No. 5. State of Incorporation 6. SIC Code
401-683-4030 **RHODE ISLAND** **3251**

7. Brief Description of the Character of Business Conducted in Rhode Island
RETAIL SALES OF AUTHORIZED BEVERAGES, GOODS, WARES & MERCHANDISE

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name GLENN D. ALLEN	Vice President Name
Street Address 1342 ANTHONY RD	Street Address
City State Zip PORTSMOUTH RI 02871	City State Zip
Secretary Name GLENN D. ALLEN	Treasurer Name GLENN D. ALLEN
Street Address 1342 ANTHONY RD	Street Address 1342 ANTHONY RD
City State Zip PORTSMOUTH RI 02871	City State Zip PORTSMOUTH RI 02871

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name NONE	Director Name
Street Address	Street Address
City State Zip	City State Zip
Director Name	Director Name
Street Address	Street Address
City State Zip	City State Zip

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES
 Number of Shares Class/Series Par Value
4,000 SHS COM NO PAR VAL

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES
 Number of Shares Class/Series Par Value
100 COMMON NONE

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 6 3 4 1 4 *

File Date: 2/2
100577
 Check No.: _____
 By: [Signature]

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.
[Signature] 1/29/01
 Signature of Officer Date
GLENN D. ALLEN
 Print or Type Name of Officer
PRESIDENT
 Title of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **63414** 2. Name of Corporation **ALLEN'S WINE & SPIRITS, INC.**
3. Street Address Principal Business Office **3001 EAST MAIN RD** City **PORTSMOUTH** State **RI** Zip **02871**
4. Business Phone No. **401-683-4030** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **3251**

7. Brief Description of the Character of Business Conducted in Rhode Island
RETAIL SALES OF AUTHORIZED BEVERAGES, GOODS, WARES & MERCHANDISE
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name **GLENN D. ALLEN**
Street Address **1342 ANTHONY RD**
City **PORTSMOUTH** State **RI** Zip **02871**
Secretary Name **GLENN D. ALLEN**

Vice President Name
Street Address
City State Zip
Treasurer Name **GLENN D. ALLEN**
Street Address **1342 ANTHONY RD**
City **PORTSMOUTH** State **RI** Zip **02871**

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) **FILL IN SPACES BEFORE USING ATTACHMENTS**
Director Name **NONE**
Street Address

City State Zip
Director Name
Street Address
City State Zip

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES	Number of Shares	Class/Series	Par Value
	4,000 SHS COM NO PAR VAL		

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES	Number of Shares	Class/Series	Par Value
	100	COMMON	NONE

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 6 3 4 1 4 *
PAID

File Date: **FEB 14 2001** *110 091231*

Check No.: **SECY OF STATE**

By: _____

FOR SECRETARY OF STATE USE ONLY

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.

Glenn D. Allen **2/12/00**
Signature of Officer Date

GLENN D. ALLEN
Print or Type Name of Officer

PRESIDENT
Title of Officer

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1999

Filing Period: January 1-March 1 • Filing Fee: \$50.00



(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **63414** 2. Name of Corporation **ALLEN'S WINE & SPIRITS, INC.**

3. Street Address Principal Business Office
3001 EAST MAN RD City **FORTSMOUTH** State **RI** Zip **02871**

4. Business Phone No. **401-683-4030** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **3251**

7. Brief Description of the Character of Business Conducted in Rhode Island
RETAIL SALE OF AUTHORIZED BEVERAGES, GOODS, WARES & MERCHANDISE

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name GLENN D ALLEN	Vice President Name
Street Address 1342 ANTHONY RD	Street Address
City PORTSMOUTH State RI Zip 02871	City State Zip
Secretary Name GLENN D. ALLEN	Treasurer Name GLENN D. ALLEN
Street Address 1342 ANTHONY RD	Street Address 1342 ANTHONY RD
City PORTSMOUTH State RI Zip 02871	City PORTSMOUTH State RI Zip 02871

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) **FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name NONE	Director Name
Street Address	Street Address
City State Zip	City State Zip
Director Name	Director Name
Street Address	Street Address
City State Zip	City State Zip

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)	11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)
AUTHORIZED SHARES	ISSUED SHARES
Number of Shares Class/Series Par Value	Number of Shares Class/Series Par Value
4,000 SHS COM NO PAR VAL	100 Common NONE

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



File Date: 04-02-99

Check No.: 8412

By: GD

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.

Glenn D Allen March 1, 1999
Signature of Officer Date

GLENN D ALLEN
Print or Type Name of Officer

PRESIDENT
Title of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1998
Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **63414** 2. Name of Corporation **ALLEN'S WINE & SPIRITS, INC.**
3. Street Address Principal Business Office **3001 EAST MAIN RD** City **PORTSMOUTH** State **RI** Zip **02871**
4. Business Phone No. **401-683-4030** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **3251**

7. Brief Description of the Character of Business Conducted in Rhode Island
RETAIL SALE OF AUTHORIZED BEVERAGES, GOODS, WARES & MERCHANDISE

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT)

President Name GLENN D. ALLEN	Vice President Name
Street Address 1342 ANTHONY RD	Street Address
City PORTSMOUTH State RI Zip 02871	City State Zip
Secretary Name GLENN D. ALLEN	Treasurer Name GLENN D. ALLEN
Street Address 1342 ANTHONY RD	Street Address 1342 ANTHONY ROAD
City PORTSMOUTH State RI Zip 02871	City PORTSMOUTH State RI Zip 02871

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT)

Director Name NONE	Director Name
Street Address	Street Address
City State Zip	City State Zip
Director Name	Director Name
Street Address	Street Address
City State Zip	City State Zip

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES	Class/Series	Par Value
4,000 SHS COM NO PAR VAL		

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES	Class/Series	Par Value
100	COMMON	NONE

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 6 3 4 1 4 *

File Date: 2.26.98
Check No.: 7317
By: IUP

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.

Signature of Officer: Glenn D. Allen Date: February 23, 1997
Print or Type Name of Officer: GLENN D. ALLEN
Title of Officer: PRESIDENT



PROFIT CORPORATION ANNUAL REPORT 1997

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **63414** 2. Name of Corporation **ALLEN'S WINE & SPIRITS, INC.**

3. Street Address Principal Business Office **3001 EAST MAIN RD** City **PORTSMOUTH** State **RI** Zip **02871**
4. Business Phone No. **401-683-4030** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **3251**

7. Brief Description of the Character of Business Conducted in Rhode Island

RETAIL SALES OF AUTHORIZED BEVERAGES, GOODS, WAREHOUSES & MERCHANDISE

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT)

President Name GLENN D. ALLEN	Vice President Name
Street Address 1342 ANTHONY RD.	Street Address
City PORTSMOUTH	City
State R-I.	State
Zip 02871	Zip
Secretary Name GLENN D. ALLEN	Treasurer Name GLENN D ALLEN
Street Address 1342 ANTHONY RD	Street Address 1342 ANTHONY RD
City PORTSMOUTH	City PORTSMOUTH
State RI	State RI
Zip 02871	Zip 02871

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT)

Director Name NONE	Director Name
Street Address	Street Address
City	City
State	State
Zip	Zip
Director Name	Director Name
Street Address	Street Address
City	City
State	State
Zip	Zip

10. SHARES AUTHORIZED AND ISSUED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
4,000 SHS COM NO PAR VAL			100	COMMON	NONE

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 6 3 4 1 4 *

File Date: **3/20/97**

Check No.: **6358**

By: **[Signature]**

FOR SECRETARY OF STATE USE ONLY

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.

[Signature] **March 1, 1997**
Signature of Officer Date

GLENN D. ALLEN
Print or Type Name of Officer

PRESIDENT
Title of Officer

PROFIT CORPORATION ANNUAL REPORT

1996



State of Rhode Island and Providence Plantations
James R. Langevin, *Secretary of State*
Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335 • (401) 277-3040

Filing Period: January 1-March 1
Filing Fee: \$50.00

PLEASE TYPE OR PRINT IN BLACK INK.

1. CORPORATE ID NO. 63414		2. NAME OF CORPORATION ALLEN'S WINE & SPIRITS, INC.			
3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE 3001 EAST MAIN ROAD		CITY PORTSMOUTH	STATE RI	ZIP CODE 02871	
4. BUSINESS PHONE NO. 401-683-4030		5. STATE OF INCORPORATION RHODE ISLAND		6. SIC CODE 3251	

7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND
RETAIL SALES OF AUTHORIZED BEVERAGES, GOODS, WARES, AND MERCHANDISE

8. NAMES AND ADDRESSES OF THE OFFICERS

PRESIDENT NAME GLENN D. ALLEN			VICE PRESIDENT NAME		
STREET ADDRESS 1342 ANTHONY ROAD			STREET ADDRESS		
CITY PORTSMOUTH	STATE RI	ZIP CODE 02871	CITY	STATE	ZIP CODE
SECRETARY NAME GLENN D. ALLEN			TREASURER NAME GLENN D. ALLEN		
STREET ADDRESS 1342 ANTHONY RD			STREET ADDRESS 1342 ANTHONY ROAD		
CITY PORTSMOUTH	STATE RI	ZIP CODE 02871	CITY PORTSMOUTH	STATE RI	ZIP CODE 02871

9. NAMES AND ADDRESSES OF THE DIRECTORS

DIRECTOR NAME NONE			DIRECTOR NAME		
STREET ADDRESS			STREET ADDRESS		
CITY	STATE	ZIP CODE	CITY	STATE	ZIP CODE
DIRECTOR NAME			DIRECTOR NAME		
STREET ADDRESS			STREET ADDRESS		
CITY	STATE	ZIP CODE	CITY	STATE	ZIP CODE

10. SHARES AUTHORIZED AND ISSUED

AUTHORIZED SHARES			ISSUED SHARES		
NUMBER OF SHARES	CLASS / SERIES	PAR VALUE	NUMBER OF SHARES	CLASS / SERIES	PAR VALUE
4,000 SHS COM	NO PAR VAL		100	COMMON	NONE

This report must be **SIGNED IN INK** by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, 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.

File Date: 2/22/96
Check No: 05241
By: *(Signature)* / *lp*
For Secretary of State Use Only

Glenn D. Allen
Signature of Officer
GLENN D. ALLEN
Print or Type Name of Officer
PRESIDENT
Title of Officer
2/21/96
Date



ANNUAL REPORT

Please Type or Print
 File Annually - Jan. 1 - March 1
 Filing Fee \$50.00
 Make Checks Payable to: Secretary of State

ALL ENTRIES MUST BE COMPLETED IN FULL OR THE FORM WILL BE RETURNED.

Corporate ID: 0063414 Annual Report for the year: 1995

Name of Corporation: ALLEN'S WINE & SPIRITS, INC.

Business entity organized under the laws of the State of: RI Business Entity is (check one):

For foreign entity, address and telephone number of principal office: N/A
 Business Corporation (See RIGL Chapter 7-1.1)
 Professional Service Corporation (See RIGL Chapter 7-5.1)

Phone: ()

Brief statement of the character of business conducted in Rhode Island:
RETAIL SALES OF AUTHORIZED
BEVERAGES, GOODS, WARES, AND
MERCHANDISE.

Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):

ALLEN'S WINE & SPIRITS
 3001 East Main Road
 Portsmouth, RI 02871
 Phone: () **(401) 683-4030**

THE NAMES OF THE OFFICERS ARE:

PRESIDENT	STREET ADDRESS	CITY/STATE	ZIP CODE
<u>GLENN D. ALLEN</u>	<u>1342 ANTHONY RD</u>	<u>PORTSMOUTH RI</u>	<u>02871</u>
VICE PRESIDENT	"	"	"
SECRETARY	"	"	"
TREASURER	"	"	"

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
<u>NONE</u>			
NAME			
NAME			

NUMBER OF SHARES AUTHORIZED (Rider may be attached)		NUMBER OF SHARES ISSUED AND OUTSTANDING (Rider may be attached)	
Number of Shares	Class / Series	Number of Shares	Class / Series
<u>4,000</u>	<u>COMMON</u>	<u>100</u>	<u>COMMON</u>

Date: 2/11, 19 95 By: Glenn D. Allen
 PRINT OR TYPE NAME OF OFFICER SIGNING: GLENN D. ALLEN
 TITLE OF OFFICER SIGNING: PRESIDENT

DESIGNATED REGISTERED AGENT FOR SERVICE OF PROCESS:

PLEASE NOTE: If the registered office and/or registered agent indicated below is incorrect, Form 9 must be filed.

BRIAN J. SPERO, ESQ
 180 ~~OLD STONE SQUARE~~ SOUTH MAIN STREET
 PROVIDENCE RI 02903

PAID
 035
 OK # 36964
 Joe

Filing Fee \$50.00
Payable to:
Secretary of State

PLEASE TYPE or PRINT
State of Rhode Island and Providence Plantations
Office of The Secretary of State
100 North Main Street
Providence, Rhode Island 02903-1335
401-277-3040

File Annually
LLC Sept. 1 - Nov. 1
CORP Jan. 1 - March 1

Corporate ID: 0063414 Annual Report for the year 1994

Name of Business Entity: ALLEN'S WINE & SPIRITS, INC.

Business entity organized under the laws of the State of RHODE ISLAND

Federal Taxpayer Identification Number: [REDACTED]

For foreign entity, address and telephone number of principal office:

N/A

Phone: ()

Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):

3001 EAST MAIN ROAD

PORTSMOUTH, RI 02871

Phone: (401) 683-4030

Business Entity is (check one):

- Business Corporation (See RIGL Chapter 7-1.1)
- Professional Service Corporation (See RIGL Chapter 7-5.1)
- Limited Liability Company (See RIGL 7-16)

Name, title and mailing address of contact person to whom communications may be directed:

GLENN D. ALLEN
3001 EAST MAIN ROAD
PORTSMOUTH, RI 02871

Brief statement of the character of business conducted in Rhode Island:

RETAIL SALES OF AUTHORIZED BEVERAGES
GOODS, LIQUORS, AND MERCHANDISE

Date of Organization: FEB 20, 1991

Date of Qualification to do business in Rhode Island (if foreign entity):

N/A

THE NAMES OF THE OFFICERS ARE:

CHIEF EXECUTIVE OFFICER OR PRESIDENT (SEE RIGL 7-1.1) STREET ADDRESS CITY/STATE ZIP CODE

GLENN D. ALLEN 1342 ANTHONY RD PORTSMOUTH RI 02871

CHIEF FINANCIAL OFFICER OR VICE PRESIDENT (SEE RIGL 7-1.1) STREET ADDRESS CITY/STATE ZIP CODE

CUSTODIAN OF RECORDS OR SECRETARY (SEE RIGL 7-1.1) STREET ADDRESS CITY/STATE ZIP CODE

GLENN D. ALLEN SAME SAME SAME

CHIEF FINANCIAL OFFICER OR TREASURER (SEE RIGL 7-1.1) STREET ADDRESS CITY/STATE ZIP CODE

GLENN D. ALLEN SAME SAME SAME

THE NAMES OF THE DIRECTORS ARE:

NAME STREET ADDRESS CITY/STATE ZIP CODE

NONE

NAME STREET ADDRESS CITY/STATE ZIP CODE

NUMBER OF SHARES AUTHORIZED (If Applicable) NUMBER OF SHARES ISSUED AND OUTSTANDING (If Applicable)

NUMBER 4000 NUMBER 100

CLASS CLASS COMMON

SERIES N/A SERIES N/A

PAR VALUE OR WITHOUT PAR NO PAR VALUE PAR VALUE OR WITHOUT PAR NO PAR VALUE

Date FEB 25 19 94 By Glenn D. Allen

PRINT OR TYPE NAME OF OFFICER SIGNING GLENN D. ALLEN

TITLE OF OFFICER SIGNING PRESIDENT

Form 31 - 94

DESIGNATED REGISTERED OR RESIDENT AGENT FOR SERVICE OF PROCESS:

PLEASE NOTE: If the Corporation has changed its registered office and/or registered or resident agent, Form 9 or Form LLC 3 must be filed

BRIAN J. SPERO ESQ
PARKRIDGE, SNOW & HAHN
180 SOUTH MAIN STREET
PROVIDENCE, R.I. 02903-7104

FILED
FEB 28 1994
By ME5903013

Filing Fee \$50.00

001703 M.R.C.
To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0063414 Annual Report for the year 1993

FIRST: The name of the corporation is ALLEN'S WINE & SPIRITS, INC

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is Retail sale of authorized beverages,
goods, wares and merchandise

FOURTH: If foreign corporation, address of its principal office N/A

FIFTH: Business address in Rhode Island 3001 East Main Road, Portsmouth, RI 02871

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
None	Director	
	Director	
	Director	
Glenn D. Allen	President	1342 Anthony Rd., Portsmouth, RI 02871
	Vice President	
Glenn D. Allen	Secretary	1342 Anthony Rd., Portsmouth, RI 02871
Glenn D. Allen	Treasurer	1342 Anthony Rd., Portsmouth, RI 02871

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
4,000		N/A	No Par Value

PAID

FEB 26 1993

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	Common	N/A	No Par Value

SECY OF STATE

Dated February 25th 19 93

ALLEN'S WINE & SPIRITS, INC.
(Name of Corporation)

By Glenn D. Allen

Title Glenn D. Allen, President

(Report must be signed by an officer)

Filing Fee \$50.00

713

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0053414 Annual Report for the year 1992

FIRST: The name of the corporation is ALLEN'S WINE & SPIRITS, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is Retail sale of authorized beverages, goods, wares and merchandise

FOURTH: If foreign corporation, address of its principal office N/A

FIFTH: Business address in Rhode Island 3001 East Main Road, Portsmouth, RI 02871

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
<u>None</u>	<u>Director</u>	
	<u>Director</u>	
	<u>Director</u>	
<u>Glenn D. Allen</u>	<u>President</u>	<u>1342 Anthony Rd., Portsmouth, RI 02871</u>
	<u>Vice President</u>	
<u>Glenn D. Allen</u>	<u>Secretary</u>	<u>1342 Anthony Rd., Portsmouth, RI 02871</u>
<u>Glenn D. Allen</u>	<u>Treasurer</u>	<u>1342 Anthony Rd., Portsmouth, RI 02871</u>

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
<u>4,000</u>	<u>Common</u>	<u>N/A</u>	<u>Par Value</u>

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
<u>100</u>	<u>Common</u>	<u>N/A</u>	<u>No Par Value</u>

Rec'd & Filed FEB 24 1992

Dated February 24th 19 92

ALLEN'S WINE & SPIRITS, INC.
(Name of Corporation)

By Glenn D. Allen

Title Glenn D. Allen, President

(Report must be signed by an officer)