



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

Annual Report for the year: **2019**
 Corporation

- Filing period: January 1 - March 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by April 1.

RECEIVED
 SECRETARY OF STATE
 CORPORATIONS DIV

2019 JAN 14 AM 11:21

1. Entity ID Number 13814		2. Exact name of the Corporation Excellent Coffee Co., Inc.			
3. Principal Office Address 259 East Avenue			City Pawtucket	State RI	Zip 02860
4. NAICS Code 311920		6. Brief description of the character of business conducted in Rhode Island Coffee roaster and distributor			
5. State of Incorporation Rhode Island					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input checked="" type="checkbox"/>					
President Name William Kapos			Vice-President Name Michael W. Kapos		
Street Address 259 East Avenue			Street Address 259 East Avenue		
City Pawtucket	State RI	Zip 02860	City Pawtucket	State RI	Zip 02860
Secretary Name William Kapos			Treasurer Name William Kapos		
Street Address 259 East Avenue			Street Address 259 East Avenue		
City Pawtucket	State RI	Zip 02960	City Pawtucket	State RI	Zip 02960
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name William Kapos			Director Name		
Street Address 259 East Avenue			Street Address		
City Pawtucket	State RI	Zip 02960	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.			NUMBER OF SHARES		PAR VALUE
			100	Common	No Par
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 John J. Partridge					Date 1/11/19
Signature of Authorized Representative <i>John J. Partridge</i>					Assistant Secretary
SIGN DOCUMENT I.C.R. FILED					

JAN 14 2019
 BY *AYVH5*

Excellent Coffee Co., Inc

13814

Additional Officer:

Assistant Secretary: John J. Partridge, 40 Westminster Street, Suite 1100, Providence, RI 02903