



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 2005

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

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 128218		2. Name of Corporation G & L Fisheries, Inc.			
3. Street Address Principal Business Office 221 BROAD HILL WAY		City WAKEFIELD		State RI	Zip 02879
4. Business Phone No. 401-789-5923		5. State of Incorporation RHODE ISLAND			6. SIC Code 2246
7. Brief Description of the Character of Business Conducted in Rhode Island TO ENGAGE IN ANY AND ALL FACETS OF THE COMMERCIAL FISHING INDUSTRY					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name GREGORY LISI			Vice President Name LAURIE A. LISI		
Street Address SAA			Street Address SAA		
City	State	Zip	City	State	Zip
Secretary Name GREGORY LISI			Treasurer Name LAURIE LISI		
Street Address SAA			Street Address SAA		
City	State	Zip	City	State	Zip
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name			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) <input type="checkbox"/>			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1,000 NO PAR VALUE			0	—	

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



File Date	FILED
Check No.	APR 12 2005
By	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 of Officer: [Signature] Date: 4-4-05  
Print or Type Name of Officer: GREGORY LISI  
Title of Officer: PRESIDENT



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)

1. Corporate ID No. 128218		2. Name of Corporation G & L Fisheries, Inc.			
3. Street Address Principal Business Office 221 BROAD HILL WAY		City WAKEFIELD	State RI	Zip 02879	
4. Business Phone No. 401-486-2698		5. State of Incorporation RHODE ISLAND			6. SIC Code 2246
7. Brief Description of the Character of Business Conducted in Rhode Island TO ENGAGE IN ANY AND ALL FACETS OF THE COMMERCIAL FISHING INDUSTRY					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name GREGORY LISI			Vice President Name LAURIE A. LISI		
Street Address 221 BROAD HILL WAY			Street Address 221 BROAD HILL WAY		
City WAKEFIELD	State RI	Zip 02879	City WAKEFIELD	State RI	Zip 02879
Secretary Name LAURIE A. LISI			Treasurer Name GREGORY LISI		
Street Address 221 BROAD HILL WAY			Street Address 221 BROAD HILL WAY		
City WAKEFIELD	State RI	Zip 02879	City WAKEFIELD	State RI	Zip 02879
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name NONE			Director Name NONE		
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) <input type="checkbox"/> AUTHORIZED SHARES DO NOT ALTER			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> ISSUED SHARES <del>DO NOT ALTER</del> 1000		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1,000 NO PAR VALUE					

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



\* 1 2 8 2 1 8 \*

File Date 4/19/04
Check No. 1128 C-28204
By: 10P
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 of Officer  
VP - LAURIE A. LISI  
Date  
4/15/04  
Print or Type Name of Officer  
VP  
Title of Officer



STATE OF RHODE ISLAND  
AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State

Edward S. Inman, III, Secretary of State  
Corporations Division  
100 North Main Street, Providence, RI 02903-1335  
401-222-3040



# 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. 2. Name of Corporation

128218

G & L Fisheries, Inc.

3. Street Address Principal Business Office

221 Broadhill way

City

Wakefield

State

R.I.

Zip

02879

4. Business Phone No.

401-789-5923

5. State of Incorporation

RHODE ISLAND

6. SIC Code

2246

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

Fishing

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

President Name

Gregory A. Lisi

Street Address

221 Broadhill way

City

Wakefield

State

R.I.

Zip

02879

Secretary Name

Laurie A. Lisi

Street Address

221 Broadhill way

City

Wakefield

State

R.I.

Zip

02879

Vice President Name

Laurie A. Lisi

Street Address

221 Broadhill way

City

Wakefield

State

R.I.

Zip

02879

Treasurer Name

Gregory A. Lisi

Street Address

221 Broadhill way

City

Wakefield

State

RI

Zip

02879

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

NONE

Street Address

City

State

Zip

Director Name

NONE

Street Address

City

State

Zip

Director Name

NONE

Street Address

City

State

Zip

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

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

1,000 NO PAR VALUE

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

ISSUED SHARES

Number of Shares

Class/Series

Par Value

NONE

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



\* 1 2 8 2 1 8 \*

File Date: 3-20-03

Check No.: 1007

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] 3-1-03  
Signature of Officer Date

Gregory A. Lisi  
Print or Type Name of Officer

President  
Title of Officer