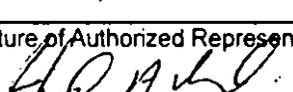


**Department of State - Business Services Division**

**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.

2019 MAR -  
 RECEIVED  
 SECRETARY  
 OF STATE  
 CORPORATION  
 DIVISION  
 AM 8:46  
 ZIP: 02818

1. Entity ID Number <b>566265</b>		2. Exact name of the Corporation <b>VC Foods, Inc.</b>			
3. Principal Office Address <b>253 Main Street</b>			City <b>East Greenwich</b>	State <b>RI</b>	Zip <b>02818</b>
4. NAICS Code <b>311615</b>		6. Brief description of the character of business conducted in Rhode Island <b>Whole sale poultry and food sales</b>			
5. State of Incorporation <b>RHODE ISLAND</b>					
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name <b>Chad A. Verdi</b>			Vice-President Name		
Street Address <b>253 Main Street</b>			Street Address		
City <b>East Greenwich</b>	State <b>RI</b>	Zip <b>02818</b>	City	State	Zip
Secretary Name <b>Chad A. Verdi</b>			Treasurer Name <b>Chad A. Verdi</b>		
Street Address <b>253 Main Street</b>			Street Address <b>253 Main Street</b>		
City <b>East Greenwich</b>	State <b>RI</b>	Zip <b>02818</b>	City <b>East Greenwich</b>	State <b>RI</b>	Zip <b>02818</b>
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
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
9. Shares Authorized			10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>		
This information is currently of record in the Department of State.  Changes require an additional filing.			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
			<b>100</b>	<b>Common</b>	<b>\$0.01</b>
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. <i>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.</i>					
Name of Authorized Representative <b>Chad A. Verdi, President</b>					Date <b>2/11/2019</b>
Signature of Authorized Representative 					

SIGN DOCUMENT HERE **FILED**

MAIL TO:  
 Division of Business Services  
 148 W. River Street, Providence, Rhode Island 02904-2615

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