



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.

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SECRETARY OF STATE  
CORPORATIONS DIV

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| 1. Entity ID Number<br><b>000088482</b>                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                | 2. Exact name of the Corporation<br><b>RUBY TUESDAY, INC</b>                                                                                                                                                                             |                                                               |                         |                     |                  |              |           |      |        |   |  |  |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|-------------------------|---------------------|------------------|--------------|-----------|------|--------|---|--|--|--|
| 3. Principal Office Address<br><b>333 EAST BROADWAY AVENUE</b>                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                |                                                                                                                                                                                                                                          | City<br><b>MARYVILLE</b>                                      | State<br><b>TN</b>      | Zip<br><b>37804</b> |                  |              |           |      |        |   |  |  |  |
| 4. NAICS Code<br><b>722511</b>                                                                                                                                                                                                                                                                                                                                                                                                                                   | 6. Brief description of the character of business conducted in Rhode Island<br><b>FULL SERVICE RESTAURANTS</b> |                                                                                                                                                                                                                                          |                                                               |                         |                     |                  |              |           |      |        |   |  |  |  |
| 5. State of Incorporation<br><b>GA</b>                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                |                                                                                                                                                                                                                                          |                                                               |                         |                     |                  |              |           |      |        |   |  |  |  |
| 7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input checked="" type="checkbox"/></span>                                                                                                                                                                                                                                                                                                        |                                                                                                                |                                                                                                                                                                                                                                          |                                                               |                         |                     |                  |              |           |      |        |   |  |  |  |
| President Name<br><b>AZIZ HASHIM</b>                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                |                                                                                                                                                                                                                                          | Vice-President Name                                           |                         |                     |                  |              |           |      |        |   |  |  |  |
| Street Address<br><b>333 EAST BROADWAY AVENUE</b>                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                |                                                                                                                                                                                                                                          | Street Address                                                |                         |                     |                  |              |           |      |        |   |  |  |  |
| City<br><b>MARYVILLE</b>                                                                                                                                                                                                                                                                                                                                                                                                                                         | State<br><b>TN</b>                                                                                             | Zip<br><b>37804</b>                                                                                                                                                                                                                      | City                                                          | State                   | Zip                 |                  |              |           |      |        |   |  |  |  |
| Secretary Name<br><b>AZIZ HASHIM</b>                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                |                                                                                                                                                                                                                                          | Treasurer Name                                                |                         |                     |                  |              |           |      |        |   |  |  |  |
| Street Address<br><b>333 EAST BROADWAY AVENUE</b>                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                |                                                                                                                                                                                                                                          | Street Address                                                |                         |                     |                  |              |           |      |        |   |  |  |  |
| City<br><b>MARYVILLE</b>                                                                                                                                                                                                                                                                                                                                                                                                                                         | State<br><b>TN</b>                                                                                             | Zip<br><b>37804</b>                                                                                                                                                                                                                      | City                                                          | State                   | Zip                 |                  |              |           |      |        |   |  |  |  |
| 8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>                                                                                                                                                                                                                                                                                                                  |                                                                                                                |                                                                                                                                                                                                                                          |                                                               |                         |                     |                  |              |           |      |        |   |  |  |  |
| Director Name<br><b>AZIZ HASHIM</b>                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                |                                                                                                                                                                                                                                          | Director Name<br><b>SUSAN BETH</b>                            |                         |                     |                  |              |           |      |        |   |  |  |  |
| Street Address<br><b>333 EAST BROADWAY AVENUE</b>                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                |                                                                                                                                                                                                                                          | Street Address<br><b>4170 ASHFORD DUNWOODY ROAD SUITE 390</b> |                         |                     |                  |              |           |      |        |   |  |  |  |
| City<br><b>MARYVILLE</b>                                                                                                                                                                                                                                                                                                                                                                                                                                         | State<br><b>TN</b>                                                                                             | Zip<br><b>37804</b>                                                                                                                                                                                                                      | City<br><b>ATLANTA</b>                                        | State<br><b>GA</b>      | Zip<br><b>30319</b> |                  |              |           |      |        |   |  |  |  |
| Director Name<br><b>SHAWN LEDERMAN</b>                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                |                                                                                                                                                                                                                                          | Director Name                                                 |                         |                     |                  |              |           |      |        |   |  |  |  |
| Street Address<br><b>4170 ASHFORD DUNWOODY ROAD SUITE 390</b>                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                |                                                                                                                                                                                                                                          | Street Address                                                |                         |                     |                  |              |           |      |        |   |  |  |  |
| City<br><b>ATLANTA</b>                                                                                                                                                                                                                                                                                                                                                                                                                                           | State<br><b>GA</b>                                                                                             | Zip<br><b>30319</b>                                                                                                                                                                                                                      | 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.<br><br>Changes require an additional filing.                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                | <table border="1"> <thead> <tr> <th>NUMBER OF SHARES</th> <th>CLASS/SERIES</th> <th>PAR VALUE</th> </tr> </thead> <tbody> <tr> <td>1000</td> <td>COMMON</td> <td>0</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table> |                                                               |                         |                     | NUMBER OF SHARES | CLASS/SERIES | PAR VALUE | 1000 | COMMON | 0 |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                | NUMBER OF SHARES                                                                                                                                                                                                                         | CLASS/SERIES                                                  | PAR VALUE               |                     |                  |              |           |      |        |   |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                | 1000                                                                                                                                                                                                                                     | COMMON                                                        | 0                       |                     |                  |              |           |      |        |   |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                |                                                                                                                                                                                                                                          |                                                               |                         |                     |                  |              |           |      |        |   |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                |                                                                                                                                                                                                                                          |                                                               |                         |                     |                  |              |           |      |        |   |  |  |  |
| 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.<br><b>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.</b> |                                                                                                                |                                                                                                                                                                                                                                          |                                                               |                         |                     |                  |              |           |      |        |   |  |  |  |
| Name of Authorized Representative<br><b>BRAD PETTY</b>                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                |                                                                                                                                                                                                                                          |                                                               | Date<br><b>3/1/2019</b> |                     |                  |              |           |      |        |   |  |  |  |
| Signature of Authorized Representative<br>                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                |                                                                                                                                                                                                                                          |                                                               |                         |                     |                  |              |           |      |        |   |  |  |  |

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## MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040

Website: www.sos.ri.gov

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Entity ID #  
000088482

**Ruby Tuesday, Inc**  
**Executive Officers**

Marty Ritson  
Co - President  
333 East Broadway Avenue  
Maryville, TN 37804

Stephanie Medley  
Chief Strategy Officer  
333 East Broadway Avenue  
Maryville, TN 37804

Patti Simpson  
Chief People Officer  
333 East Broadway Avenue  
Maryville, TN 37804

Ellen Clarry  
Chief Supply Chain Officer  
333 East Broadway Avenue  
Maryville, TN 37804