



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
 2019 MAR 13 PM 2:42

1. Entity ID Number 66133		2. Exact name of the Corporation PHANTOM FOOD CORPORATION			
3. Principal Office Address Robert L. Simmons, 50 Abbott Run Valley Rd, U1601, PO Bx7366			City Cumberland	State RI	Zip 02964
4. NAICS Code 722511		6. Brief description of the character of business conducted in Rhode Island Full service resaurant			
5. State of Incorporation Rhode Island					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Brian M. Lahousse			Vice-President Name		
Street Address 51 Suffolk Street			Street Address		
City Bellingham	State MA	Zip 02019	City	State	Zip
Secretary Name Robert L. Simmons			Treasurer Name Brian M. Lahousse		
Street Address 50 Abbott Run Valley Rd, U1601, P.O. Box 7366			Street Address 51 Suffolk Street		
City Cumberland	State RI	Zip 02864	City Bellingham	State MA	Zip 02019
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Brian M. Lahousse			Director Name		
Street Address 51 Suffolk Street			Street Address		
City Bellingham	State MA	Zip 02019	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized					
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>		10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>			
		NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	
This information is currently of record in the Department of State. Changes require an additional filing.		*200*	Common	No Par Value	
Name of Authorized Representative Brian M. Lahousse, President		Date January 30, 2019			
Signature of Authorized Representative 		FILED SIGN DOCUMENT HERE MAR 13 2019			

MAIL TO:
 Division of Business Services
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 Phone: (401) 222-3040
 Website: www.sos.ri.gov

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