



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. 72322		2. Name of Corporation MILLER'S CROSSING, INC.			
3. Street Address Principal Business Office 1281 Hope Road			City Hope	State RI	Zip 02831
4. Business Phone No. 4015249000		5. State of Incorporation RHODE ISLAND			6. SIC Code 3079
7. Brief Description of the Character of Business Conducted in Rhode Island A BAR AND RESTAURANT BUSINESS.					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name David J. Miller			Vice President Name		
Street Address 1281 Hope Rd.			Street Address		
City Hope	State RI	Zip 02831	City	State	Zip
Secretary Name			Treasurer Name		
Street Address			Street Address		
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"/> AUTHORIZED SHARES			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
100 NO PAR VALUE			— 0 —		

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



FILED

File Date APR 15 2005 - 2896

Check No. By 105

By: _____

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

Date

DAVID JAMES MILLER

Print or Type Name of Officer

PRESIDENT

Title of Officer



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. <u>72322</u>		2. Name of Corporation <u>MILLER'S CROSSINGS INC.</u>			
3. Street Address Principal Business Office <u>1281 Hope RD</u>			City <u>HOPE</u>	State <u>RI</u>	Zip <u>02831</u>
4. Business Phone No. <u>401-524-9000</u>		5. State of Incorporation <u>RHODE ISLAND</u>			6. SIC Code <u>3079</u>
7. Brief Description of the Character of Business Conducted in Rhode Island <u>BAR & RESTAURANT BUSINESS</u>					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name <u>DAVID JAMES MILLER</u>			Vice President Name <u>DAVID JAMES MILLER</u>		
Street Address <u>1281 Hope RD</u>			Street Address <u>1281 Hope RD</u>		
City <u>HOPE.</u>	State <u>RI</u>	Zip <u>02831</u>	City <u>HOPE.</u>	State <u>RI</u>	Zip <u>02831</u>
Secretary Name			Treasurer Name		
Street Address			Street Address		
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
<u>100 NO</u>	<u>PAR VALUE</u>		<u>0</u>		

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

File Date	<u>9/29/04</u>
Check No.	<u>2857</u>
By:	<u>[Signature]</u>
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] 9/29/04
Signature of Officer Date
DAVID JAMES MILLER
Print or Type Name of Officer
PRESIDENT
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. **72322** 2. Name of Corporation **MILLER'S CROSSING, INC.**

3. Street Address Principal Business Office

93 Oak Hill Drive

4. Business Phone No.

5. State of Incorporation

RHODE ISLAND

City

Cranston

State

RI

Zip

02920

6. SIC Code

3079

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

bar and restaurant business

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

President Name

David Miller

Street Address

93 Oak Hill Drive

City

State

Zip

Cranston

RI

02920

Vice President Name

David Miller

Street Address

93 Oak Hill Drive

City

State

Zip

Cranston

RI

02920

Treasurer Name

Secretary Name

Street Address

Street Address

City

State

Zip

City

State

Zip

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) 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)

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

100 NO PAR VALUE

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

ISSUED SHARES

Number of Shares

Class/Series

Par Value



* 7 2 3 2 2 *

File Date: **2-11-03**

Check No.: **2614**

By: **VP**

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

Date

DAVID JAMES MILLER

Print or Type Name of Officer

President

Title of Officer



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

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



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **72322**
2. Name of Corporation **MILLER'S CROSSING, INC.**
3. Street Address Principal Business Office
93 Oak Hill Drive
4. Business Phone No.
5. State of Incorporation **RHODE ISLAND**

City **Cranston** State **RI** Zip **02920**
6. SIC Code **3079**

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

bar and restaurant business

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

President Name	Vice President Name
David Miller	David Miller
Street Address	Street Address
93 Oak Hill Drive	93 Oak Hill Drive
City State Zip	City State Zip
Cranston RI 02920	Cranston RI 02920
Secretary Name	Treasurer Name
David Miller	David Miller
Street Address	Street Address
93 Oak Hill Drive	93 Oak Hill Drive
City State Zip	City State Zip
Cranston RI 02920	Cranston RI 02920

9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

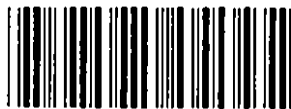
Director Name	Director Name
Street Address	Street Address
City State Zip	City State Zip
Director Name	Director Name
Street Address	Street Address
City State Zip	City State Zip

10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)

AUTHORIZED SHARES
Number of Shares Class/Series Par Value
100 NO PAR VALUE

11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)

ISSUED SHARES
Number of Shares Class/Series Par Value
-0-



* 7 2 3 2 2 *

File Date: 2-11-02

Check No.: 2198

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]
Signature of Officer
David Miller
Date 1/18/02

Print or Type Name of Officer

President

Title of Officer



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

Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 72322 2. Name of Corporation MILLER'S CROSSING, INC.

3. Street Address Principal Business Office

93 Oak Hill Drive

City

Cranston

State

RI

Zip

02920

4. Business Phone No.

5. State of Incorporation
RHODE ISLAND

6. 3079

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

bar and restaurant business

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

President Name

David Miller

Vice President Name

David Miller

Street Address

93 Oak Hill Drive

Street Address

93 Oak Hill Drive

City

Cranston

State

RI

Zip

02920

City

Cranston

State

RI

Zip

02920

Secretary Name

David Miller

Treasurer Name

David Miller

Street Address

93 Oak Hill Drive

Street Address

93 Oak Hill Drive

City

Cranston

State

RI

Zip

02920

City

Cranston

State

RI

Zip

02920

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) **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)

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

100 SHS NO PAR VALUE

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

ISSUED SHARES

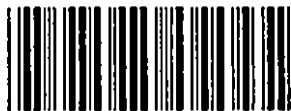
Number of Shares

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



* 7 2 3 2 2 *

File Date: 2/14/01

Check No.: 1770

By: [Signature]

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including the accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer

David J. Miller

Print or Type Name of Officer

President

Title of Officer

RECEIVED
JAN 26 12 05 PM '01
SECRETARY OF STATE



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

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.

2. Name of Corporation

72322

MILLER'S CROSSING, INC.

3. Street Address Principal Business Office

303 Varnum Drive

City

Warwick

State

RI

Zip

02886

4. Business Phone No.

(401) 463-9792

5. State of Incorporation

RHODE ISLAND

6. SIC Code

3079

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

A bar and restaurant business

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

President Name

David Miller

Vice President Name

David Miller

Street Address

303 Varnum Drive

Street Address

303 Varnum Drive

City

Warwick

State

RI

Zip

02886

City

Warwick

State

RI

Zip

02886

Secretary Name

David Miller

Treasurer Name

David Miller

Street Address

303 Varnum Drive

Street Address

303 Varnum Drive

City

Warwick

State

RI

Zip

02886

City

Warwick

State

RI

Zip

02886

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) **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)

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

100 SHS NO PAR VALUE

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

ISSUED SHARES

Number of Shares

Class/Series

Par Value

0
NONE.

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



* 7 2 3 2 2 *

File Date: 1/35/00

Check No.: 1367

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

David J. Miller

Print or Type Name of Officer

President

Title of Officer



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

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR **1999**

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

(FORM MUST BE TYPED IN BLACK)



1. Corporate ID No. **72322** 2. Name of Corporation **MILLER'S CROSSING, INC.**

3. Street Address Principal Business Office **303 Varnum Drive** City **Warwick** State **RI** Zip **02886**
4. Business Phone No. **(401) 463-9792** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **3079**

7. Brief Description of the Character of Business Conducted in Rhode Island
A bar and restaurant business

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

President Name David Miller Street Address 303 Varnum Drive City Warwick State RI Zip 02886	Vice President Name David Miller Street Address 303 Varnum Drive City Warwick State RI Zip 02886
Secretary Name David Miller Street Address 303 Varnum Drive City Warwick State RI Zip 02886	Treasurer Name David Miller Street Address 303 Varnum Drive City Warwick State RI Zip 02886

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) **FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name Street Address City State Zip	Director Name Street Address City State Zip
Director Name Street Address City State Zip	Director Name Street Address City State Zip

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

AUTHORIZED SHARES
Number of Shares Class/Series Par Value
100 SHS NO PAR VALUE

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

ISSUED SHARES
Number of Shares Class/Series Par Value
0



File Date: **03-29-99**
Check No.: **1059**
By: **JD**

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 **David J. Miller** Date **3/27**
Print or Type Name of Officer
President
Title of Officer



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

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-277-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR **1998**

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 2. Name of Corporation

72322

MILLER'S CROSSING, INC.

3. Street Address Principal Business Office

303 Varnum Drive

City

Warwick

State

RI

Zip

02886

4. Business Phone No.

5. State of Incorporation

(401) 463-9792

RHODE ISLAND

6. SIC Code

3079

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

A bar and restaurant business

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT)

President Name

David Miller

Street Address

303 Varnum Drive

City

Warwick

State

RI

Zip

02886

Vice President Name

David Miller

Street Address

303 Varnum Drive

City

Warwick

State

RI

Zip

02886

Secretary Name

David Miller

Street Address

303 Varnum Drive

City

Warwick

State

RI

Zip

02886

Treasurer Name

David Miller

Street Address

303 Varnum Drive

City

Warwick

State

RI

Zip

02886

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT)

Director Name

NONE

Street Address

City

State

Zip

Director Name

Street Address

City

State

Zip

Director Name

Director Name

Street Address

Street Address

City

State

Zip

City

State

Zip

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

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

100 SHS NO PAR VALUE

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

ISSUED SHARES

Number of Shares

Class/Series

Par Value

0

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



* 7 2 3 2 2 *

File Date: **2/25/98**

Check No.: **328**

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

David J. Miller

Print or Type Name of Officer

President

Title of Officer

Date

2-23-98



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

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-277-3040



PROFIT CORPORATION ANNUAL REPORT 1997

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.		2. Name of Corporation		3. Street Address Principal Business Office		City		State		Zip	
72322		MILLER'S CROSSING, INC.		303 Varnum Drive		Warwick		RI		02886	
4. Business Phone No.		5. State of Incorporation		6. SIC Code							
401-463-9792		RHODE ISLAND		3079							
7. Brief Description of the Character of Business Conducted in Rhode Island											
A bar and restaurant business											
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT)											
President Name				Vice President Name							
David Miller				David Miller							
Street Address				Street Address							
303 Varnum Drive				303 Varnum Drive							
City		State		Zip		City		State		Zip	
Warwick		RI		02886		Warwick		RI		02886	
Secretary Name				Treasurer Name							
David Miller				David Miller							
Street Address				Street Address							
303 Varnum Drive				303 Varnum Drive							
City		State		Zip		City		State		Zip	
Warwick		RI		02886		Warwick		RI		02886	
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT)											
Director Name				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 AND ISSUED (*X* BOX FOR ATTACHMENT)											
AUTHORIZED SHARES						ISSUED SHARES					
Number of Shares		Class/Series		Par Value		Number of Shares		Class/Series		Par Value	
100 SHS NO PAR VALUE						0					

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



* 7 2 3 2 2 *

File Date: 4.17.97
Check No.: 380
By: CP

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: 4-3-97
David J. Miller
Print or Type Name of Officer
President
Title of Officer

PROFIT CORPORATION
ANNUAL REPORT

1996



State of Rhode Island and Providence Plantations
James R. Langevin, Secretary of State
Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335 • (401) 277-3040

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

PLEASE TYPE OR PRINT IN BLACK INK.

1. CORPORATE ID NO. 72322 2. NAME OF CORPORATION MILLER'S CROSSING, INC.
3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE 303 Varnum Drive CITY Warwick STATE RI ZIP CODE 02886
4. BUSINESS PHONE NO. 401-463-9792 5. STATE OF INCORPORATION RHODE ISLAND 6. SIC CODE 3079
7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND
a bar and restaurant business

8. NAMES AND ADDRESSES OF THE OFFICERS

PRESIDENT NAME David Miller VICE PRESIDENT NAME David Miller
STREET ADDRESS 303 Varnum Drive STREET ADDRESS 303 Varnum Drive
CITY Warwick STATE RI ZIP CODE 02886 CITY Warwick STATE RI ZIP CODE 02886
SECRETARY NAME David Miller TREASURER NAME David Miller
STREET ADDRESS 303 Varnum Drive STREET ADDRESS 303 Varnum Drive
CITY Warwick STATE RI ZIP CODE 02886 CITY Warwick STATE RI ZIP CODE 02886

9. NAMES AND ADDRESSES OF THE DIRECTORS

DIRECTOR NAME NONE DIRECTOR NAME
STREET ADDRESS STREET ADDRESS
CITY STATE ZIP CODE CITY STATE ZIP CODE
DIRECTOR NAME DIRECTOR NAME
STREET ADDRESS STREET ADDRESS
CITY STATE ZIP CODE CITY STATE ZIP CODE

10. SHARES AUTHORIZED AND ISSUED

AUTHORIZED SHARES			ISSUED SHARES		
NUMBER OF SHARES	CLASS / SERIES	PAR VALUE	NUMBER OF SHARES	CLASS / SERIES	PAR VALUE
100 SHS NO PAR VALUE			0		

This report must be SIGNED IN INK by either the
President, Vice President, Secretary, Assistant Secretary, Treasurer, 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.

File Date:

Check No:

By:

For Secretary of State Use Only

Signature of Officer

Print or Type Name of Officer

Title of Officer

Date

State of Rhode Island and Providence Plantations



Office of The Secretary of State

100 North Main Street

Providence, Rhode Island 02903-1335

401-277-3040

ANNUAL REPORT

Please Type or Print

File Annually - Jan. 1 - March

Filing Fee \$50.00

Make Checks Payable to: Secretary of State

ALL ENTRIES MUST BE COMPLETED IN FULL OR THE FORM WILL BE RETURNED.

Corporate ID: 0072322

Annual Report for the year: 1995

Name of Corporation: MILLER'S CROSSING, INC.

Business entity organized under the laws of the State of: RI

For foreign entity, address and telephone number of principal office

Business Entity is (check one):

☒ Business Corporation (See RIGL Chapter 7-1.1)☐ Professional Service Corporation (See RIGL Chapter 7-5.1)

Phone: ()

Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):

Brief statement of the character of business conducted in Rhode Island:

Bar & Grill

Phone: ()

THE NAMES OF THE OFFICERS ARE:

PRESIDENT	STREET ADDRESS	CITY/STATE	ZIP CODE
DAVID James Miller	303 VARIUM DRIVE	WAR. RI	02815

VICE PRESIDENT	STREET ADDRESS	CITY/STATE	ZIP CODE
None			

SECRETARY	STREET ADDRESS	CITY/STATE	ZIP CODE
None			

TREASURER	STREET ADDRESS	CITY/STATE	ZIP CODE
None			

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
None			

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
None			

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
None			

NUMBER OF SHARES AUTHORIZED (Rider may be attached)

NUMBER OF SHARES ISSUED AND OUTSTANDING (Rider may be attached)

Number of Shares

Class / Series

Number of Shares

Class / Series

100

0

0

Date 1-05, 1995

By David James Miller

PRINT OR TYPE NAME OF OFFICER SIGNING

TITLE OF OFFICER SIGNING

Form 31 1/95

DESIGNATED REGISTERED AGENT FOR SERVICE OF PROCESS:

PLEASE NOTE: If the registered office and/or registered agent indicated below is incorrect, Form 9 must be filed.

KAREN M. LYNCH

500 TOLLGATE ROAD

WARWICK

RI 02886

FILED

MAR 07 1995

By CC 1389

Filing Fee \$50.00
Payable to:
Secretary of State

PLEASE TYPE or PRINT
State of Rhode Island and Providence Plantations
Office of The Secretary of State
100 North Main Street
Providence, Rhode Island 02903-1335
401-277-3040

File Annually
LLC Sept 1 - Nov 1
CORP Jan 1 - March 1

Corporate ID 0072322 Annual Report for the year: 1994

Name of Business Entity: MILLER'S CROSSING, INC.

Business entity organized under the laws of the State of Rhode Island

Federal Taxpayer Identification Number: [REDACTED]

For foreign entity, address and telephone number of principal office:

Phone: ()

Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):

600 Tollgate Road, Warwick, RI 02886

Phone: 401 739-8500

Business Entity is (check one)

- ☒ Business Corporation (See RIGL Chapter 7-1.1)
☐ Professional Service Corporation (See RIGL Chapter 7-5.1)
☐ Limited Liability Company (See RIGL 7-16)

Name, title and mailing address of contact person to whom communications may be directed:

Karen M. Lynch, Esquire

600 Tollgate Road

Warwick, RI 02886

Brief statement of the character of business conducted in Rhode Island
A bar and restaurant business

Date of Organization May 1, 1993

Date of Qualification to do business in Rhode Island (if foreign entity)

THE NAMES OF THE OFFICERS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
<input checked="" type="checkbox"/> CHIEF EXECUTIVE OFFICER OR <input checked="" type="checkbox"/> PRESIDENT (Check one) David Miller	33 Varnum Drive	Warwick, RI	02886
<input type="checkbox"/> CHIEF OPERATING OFFICER OR <input checked="" type="checkbox"/> VICE PRESIDENT (Check one) David Miller	33 Varnum Drive	Warwick, RI	02886
<input type="checkbox"/> CUSTODIAN OF RECORDS OR <input type="checkbox"/> SECRETARY (Check one) David Miller	33 Varnum Drive	Warwick, RI	02886
<input type="checkbox"/> CHIEF FINANCIAL OFFICER OR <input checked="" type="checkbox"/> TREASURER (Check one) David Miller	33 Varnum Drive	Warwick, RI	02886

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
NONE			

NUMBER OF SHARES AUTHORIZED (If Applicable)

NUMBER 100

CLASS Common

SERIES

PAR VALUE OR No par value
WITHOUT PAR

Date 2/22 19 94

NUMBER OF SHARES ISSUED AND OUTSTANDING (If Applicable)

NUMBER

CLASS

SERIES

PAR VALUE OR
WITHOUT PAR

By [Signature]

David Miller

(PRINT OR TYPE NAME OF OFFICER SIGNING)

President

(TITLE OF OFFICER SIGNING)

Form 31 1994

DESIGNATED REGISTERED OR RESIDENT AGENT FOR SERVICE OF PROCESS:

PLEASE NOTE: If the Corporation has changed its registered office and/or registered or resident agent, Form 9 or Form LLC 3 must be filed

FILED

FEB 24 1994

By ME59 1013

KAREN M. LYNCH
600 TOLLGATE ROAD
WARWICK RI 02886