



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 IN BLACK)

1. Corporate ID No. 137322		2. Name of Corporation FRONTLINE FOODS, INC.			
3. Street Address Principal Business Office			City	State	Zip
4. Business Phone No.		5. State of Incorporation RHODE ISLAND			6. SIC Code
7. Brief Description of the Character of Business Conducted in Rhode Island THE PROCESSING, SHIPPING, PACKAGING, WHOLESALE AND RETAIL SALES OF SEAFOOD AND SEAFOOD PRODUCTS					
8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Noah G. Clark			Vice President Name		
Street Address PO Box 608			Street Address		
City Narragansett	State RI	Zip 02882	City	State	Zip
Secretary Name Noah G. Clark			Treasurer Name Noah G. Clark		
Street Address PO Box 608			Street Address PO Box 608		
City Narragansett	State	Zip	City Narragansett	State	Zip
9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Noah G. Clark			Director Name		
Street Address PO Box 608			Street Address		
City Narragansett	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		100	Common	No Par

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



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\*137322 DBC 01/17/05 12:22:15 PM\*

File Date 2-14-05

Check No. 1023

By: KB

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.

Noah G. Clark 31 Jan 05  
Signature of Officer Date  
NOAH G. CLARK  
Print or Type Name of Officer  
Pres  
Title of Officer