



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

Lathew 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. \*123225\* 2. Name of Corporation A. Pagliarini's Family Restaurant, Inc.  
3. Street Address Principal Business Office 637 Washington Street City Coventry State RI Zip 02816  
4. Business Phone No. 401-828-5555 5. State of Incorporation RHODE ISLAND 6. SIC Code 3079

7. Brief Description of the Character of Business Conducted in Rhode Island  
TO ENGAGE IN THE BUSINESS OF OPERATING A RESTAURANT FOR THE SERVICE OF FOOD AND DRINK

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

President Name			Vice President Name		
Arthur J. Paradis			AnnMarie Paradis		
Street Address			Street Address		
48 Ginger Trail			48 Ginger Trail		
City	State	Zip	City	State	Zip
Coventry	RI	02816	Coventry	RI	02816
Secretary Name			Treasurer Name		
AnnMarie Paradis			Arthur J. Paradis		
Street Address			Street Address		
48 Ginger Trail			48 Ginger Trail		
City	State	Zip	City	State	Zip
Coventry	RI	02816	Coventry	RI	02816

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

Director Name			Director Name		
Arthur J. Paradis			AnnMarie Paradis		
Street Address			Street Address		
48 Ginger Trail			48 Ginger Trail		
City	State	Zip	City	State	Zip
Coventry	RI	02816	Coventry	RI	02816
Director Name			Director Name		
Street Address			Street Address		
City			City		
State			State		
Zip			Zip		

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

AUTHORIZED SHARES  
Number of Shares Class/Series Par Value  
8,000 \$.01 PAR VALUE

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

ISSUED SHARES  
Number of Shares Class/Series Par Value  
200 common \$.01 par val.

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



\*123225 DBC2/14/031:10:36 PM\*  
File Date **FILED**  
Check No. **MAR 29 2005**  
By: lib  
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.  
Arthur J. Paradis 3-28-05  
Signature of Officer Date  
**ARTHUR J. PARADIS**  
Print or Type Name of Officer  
**PRESIDENT**  
Title of Officer

**Attachment to Annual Report of A. Pagliarini's Family Restaurant, Inc.**

**8. Names and Addresses of the Officers:**

**Vice President**

Jason A. Paradis

48 Ginger Trail

Coventry RI 02816

**Vice President**

Steven M. Paradis

48 Ginger Trail

Coventry RI 02816

**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004**

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3. Street Address Principal Business Office 637 Washington Street		City Coventry	State RI
		Zip 02816	
4. Business Phone No. 401-828-5555	5. State of Incorporation RHODE ISLAND		6. SIC Code 3079
7. Brief Description of the Character of Business Conducted in Rhode Island TO ENGAGE IN THE BUSINESS OF OPERATING A RESTAURANT FOR THE SERVICE OF FOOD AND DRINK			
8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name Arthur J. Paradis		Vice President Name AnnMarie Paradis	
Street Address 48 Ginger Trail		Street Address 48 Ginger Trail	
City Coventry	State RI	Zip 02816	City Coventry
			State RI
			Zip 02816
Secretary Name AnnMarie Paradis		Treasurer Name Arthur J. Paradis	
Street Address 48 Ginger Trail		Street Address 48 Ginger Trail	
City Coventry	State RI	Zip 02816	City Coventry
			State RI
			Zip 02816
9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
Director Name Arthur J. Paradis		Director Name AnnMarie Paradis	
Street Address 48 Ginger Trail		Street Address 48 Ginger Trail	
City Coventry	State RI	Zip 02816	City Coventry
			State RI
			Zip 02816
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
8,000	\$0.01 PAR VALUE		200
			common
			\$0.01 par val.

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



\*123225 DBC2/14/031:10:36 PM\*

File Date 2-13-04

Check No. 1741

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] 2-11-04  
Signature of Officer Date

Arthur J. Paradis  
Print or Type Name of Officer

President  
Title of Officer

**Attachment to Annual Report of A. Pagliarini's Family Restaurant, Inc.**

**8. Names and Addresses of the Officers:**

**Vice President**

Jason A. Paradis

48 Ginger Trail

Coventry RI 02816

**Vice President**

Steven M. Paradis

48 Ginger Trail

Coventry RI 02816



**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003**

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

(FORM MUST BE TYPED IN BLACK)

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<b>8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS</b>					
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Street Address 48 Ginger Trail		Street Address 48 Ginger Trail			
City Coventry	State RI	Zip 02816	City Coventry		
Secretary Name AnnMarie Paradis		Treasurer Name Arthur J. Paradis			
Street Address 48 Ginger Trail		Street Address 48 Ginger Trail			
City Coventry	State RI	Zip 02816	City Coventry		
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Director Name Arthur J. Paradis		Director Name AnnMarie Paradis			
Street Address 48 Ginger Trail		Street Address 48 Ginger Trail			
City Coventry	State RI	Zip 02816	City Coventry		
Director Name		Director Name			
Street Address		Street Address			
City	State	Zip	City		
<b>10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/></b>					
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
8,000	\$01 PAR VALUE		200	common	\$.01 par val.

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



\*123225 DBC2/14/031:10:36 PM\*

File Date 2/28/03

Check No 1279

By 82

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.

Arthur J. Paradis 2-16-03  
Signature of Officer Date

Arthur J. Paradis  
Print or Type Name of Officer

President  
Title of Officer

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**Vice President**

Jason A. Paradis

48 Ginger Trail

Coventry RI 02816

**Vice President**

Steven M. Paradis

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