RI SOS Filing Number: 201993318710 Date: 5/16/2019 11:32:00 AM State of Rhode Island and Providence Plantations **Department of State - Business Services Division** Annual Report for the year: 2017 Corporation Filing period: January 1 - March 1 → Filing Fee: \$50.00 2019 MAY 16 AH 11: 29 -> Penalty: Additional \$25.00 fee if form is not filed by April 1. 1. Entity ID Number 2. Exact name of the Corporation State providence place 02903 21 6. Brief description of the character of business conducted in Rhode Island Faut Food Retaurant. ΚI 7. List ALL officers (names and addresses) Check the box to indicate an attachment President Name Vice-President Name KOD. David. Street Address Street Address Lisa State Ζıp 10954. Secretary Name Treasurer Name Street Address Street Address City State Zip 8. List ALL directors (names and addresses) Check the box to indicate an attachment Director Name Director Name Street Address Street Address State City State Zıp 10954 Narue Director Name Director Name Street Address Street Address City State State Zip 9. Shares Authorized Shares Issued Check the box to indicate an attachment This information is currently of record in the CLASS/SERIES Department of State. Changes require an additional filing. 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 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. Name of Authorized Representative Signature of Authorized Representative STON DOUBLENTHERE

MAIL TO:

Division of Business Services

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BY M. P95 DB FORM 630 - Revised: 10/2017