PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

| 1. Corporate ID No. 2035 | 2. Name of Cor BASIL'S P | | | . • | |
|--|---|--------------------------|--|--------------------------|---------------------------------------|
| 3. Street Address Principal Busii | 3. Street Address Principal Business Office | | | State | Zip |
| 1270 CRANSTON STR | EET | | CRANSTON | RI | 02720- |
| 4. Business Phone No. 5. State of Incorpora | | | | | 6. SIC Code |
| 4019464480 RHODE ISLAI | | | ND | | 3081 |
| 7. Brief Description of the Chara RESTAURANT AND BEER | | onducted in Rhode Island | | | |
| 8. NAMES AND ADDRES | SES OF THE O | FFICERS ("X" BOX FOR | ATTACHMENT) FILL IN S | PACES BEFORE USING AT | TACHMENTS |
| President Name SOTERIOS TSIMIKAS | | | Vice President Name ANTIGONE TSIMI | WAC. | |
| Street Address | | | Street Address | .NAS | |
| 26 GERANIUM CIRCLE | | | 26 GERANIUM CI | | 21 |
| City | State | Zip | City | State | Zip) |
| CRANSTON | RI | 02910 | CRANSTON | RI | 02910 |
| ecretary Name | | | Treasurer Name | | |
| ANTIGONE TSIMIKAS | | | SOTERIOS TSIMI | KAS | 9 - 3 - 3 - 3 |
| Street Address 26 GERANIUM CIRCLE | | | Street Address . 26 GERANIUM CIRCLE | | |
| City | State | Zip | City | State | Zip |
| CRANSTON | RI | 02910 | . CRANSTON | RI | 02910 |
| 9. NAMES AND ADDRESS Director Name | SES OF THE DI | RECTORS ("X" BOX FO | RATTACHMENT) FILL IN Director Name | SPACES BEFORE USING | ATTACHMENTS |
| SOTERIOS TSIMIKAS | | | ANTIGONE TSIMI | KAS | |
| Street Address | | | Street Address | | · · · · · · · · · · · · · · · · · · · |
| 26 GERANIUM CIRCLE | € | | 26 GERANIUM CI | RCLE | |
| City | State | Zip | ·City | State | Zip |
| CRANSTON | RI | 02910 | CRANSTON | RI | 02910 |
| Director Name | | | Director Name | | |
| Street Address | | | · Sireet Address | | |
| City | State | Zip | .City | State | Zip |
| 10. SHARES AUTHORIZE | ED ("X" BOX FO | RATTACHMENT) | | 'X" BOX FOR ATTACHMEN | <i>n</i> – |
| AUTHORIZED SHARES Number of Shares | Class/Series | Par Value | ISSUED SHARES Number of Shares Class/Series Par Value | | |
| | Character | 7.00 70100 | Trainer by Shares | CILLIDAENES | 7 dr Ferne |
| 100 \$10.00 PAR VALUE | | 100 | COMMON | 10 | |
| his report must be signe | ed in ink by eit | her the President, Vice | President, Secretary, Ass | istant Secretary, Treasu | urer, Receiver or Trus |
| | | | | | |

2035 DBC 11/20/<u>05</u> 10:10:15 PM File Date_ NOV 21 Check No.

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.

| A | ^ . | |
|----------------------|------------|----------|
| saterial | Translee | 11-91-05 |
| Signature of Officer | 1301101100 | 11-11-12 |
| | 18 411 4 6 | |

SOTERIOS TSIMIKAS

Print or Type Name of Officer

PRESIDENT Title of Officer

Form 630 12/01

401.222.3040



Matthew A. Brown, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401.222.3040

| FORM MUST BE TYPED IN | • | | | | |
|--|------------------|-------------------------|------------------------------------|----------------------|---------------------|
| . Corporate ID No. | 2. Name of Corpo | | | | |
| 2035 | BASIL'S PIZ | ZA, INC. | | | |
| Street Address Principal Bus | | | City | State | Zip |
| 1270 CRANSTON ST | REET | | CRANSTON | RI | 02720 |
| . Business Phone No. | | 5. State of Incorporati | | | 6. SIC Cod |
| 4019464480 | | RHODE ISLAN | D | | 3081 |
| . Brief Description of the Cha RESTAURANT AND BEE | | ducted in Rhode Island | | | |
| B. NAMES AND ADDRES | sses of the of | FICERS ("X" BOX FOR A | TTACHMENT) FILL INS | PACES BEFORE USING A | TTACHMENTS |
| OTERIOS TSIMIKAS | 1 | | Vice President Name ANTIGONE TSIMI | YAC . | |
| reei Address | • | | Sireei Address | . MS | |
| 6 GERANIUM CIRCI | Æ | | 26 GERANIUM CI | י פרו ב | |
| ity | State | Zip | City | | 71- |
| RANSTON | RI | 02910 | CRANSTON | State RI | <i>Zip</i> 02910 |
| cretary Name | | 02310 | Treasurer Name | K. | 02910 |
| NTIGONE TSIMIKAS | | | SOTERIOS TSIMI | KAS | |
| reet Address | | | Street Address | | |
| 6 GERANIUM CIRCL | Æ | | 26 GERANIUM CI | RCLE | |
| ity: | State | Zip | Ciry | State | Zip |
| RANSTON | RI | 02910 | CRANSTON | RI | 02910 |
| . NAMES AND ADDRES | SSES OF THE DIR | ECTORS ("X" BOX FOR | ATTACHMENT) FILL IN | | - |
| OTERIOS TSIMIKAS | | | ANTIGONE TSIMI | KAS. | |
| rees Address | | | Street Address | 1000 | |
| 6 GERANIUM CIRCL | E | | 26 GERANIUM CI | RCI.F | |
| iny | State | Zip | City | State | 7: ₀ |
| RANSTON | RI | 02910 | CRANSTON | RI | <i>Zip</i> 02910 |
| irector Name | | | Director Name | ••• | 02,310 |
| rcei Address | | | Street Address | | |
| ity | State | Zip | City | State | Zip |
| 0. SHARES AUTHORIZ UTHORIZED SHARES | ED ("X" BOX FOR | ATTACHMENT) | | X" BOX FOR ATTACHMEN | m □ |
| umber of Shares | Class/Series | Par Value | ISSUED SHARES Number of Shares | Class/Series | Par Value |
| 00 \$10.00 PAR VALU | E | | 100 | COMMON | 10 |

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



| *2035 DBC | 01/26/04 12:31:00 PM* |
|-------------|-----------------------|
| File Date | 3/5/04 |
| Check No. | 2621 |
| B <u>y:</u> | 18. |
| FOR SECRETA | ARY 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.

Section of Officer TSTANIAC Day

SOTERIOS TSIMIKAS

Print or Type Name of Officer

PRESIDENT

Form 630 12/01



2035 DBC 11/03/03 10:53:32 AM

FOR SECRETARY OF STATE USE

File Date

Check No.

Matthew A. Brown, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401.222.3040

| PROFIT CORPO Filing Period: January 1 - | RATION A March 1 • Fi | ANNUAL REP iling Fee: \$50.00 | ORT FOR THE | YEAR 2003 | |
|---|---|----------------------------------|---|--|--------------------------|
| (FORM MUST BE TYPED IN BI 1. Corporate ID No. 2035 | LACK) 2. Name of Corpoi BASIL'S PIZ | | | | |
| 3. Street Address Principal Busin | | 24, 1110. | Ciỳ | State | Zip · · |
| 1270 CRANSTON STRI | ~ | | CRANSTON | RI | 02720- |
| 4. Business Phone No. | | 5. State of Incorporat | L | | 6. SIC Code |
| 4019464480 | | RHODE ISLAN | | | 3081 |
| 7. Brief Description of the Chara RESTAURANT AND BEER | | ducted in Rhode Island | | | |
| 8. NAMES AND ADDRESS President Name SOTERIOS TSIMIKAS | es of the off | ICERS ("X" BOX FOR | (TTACHMENT) FILL IN S Vice President Name ANTIGONE TSIM | | TACHMENTS |
| Street Address | | · | Street Address | · · · · · | |
| 26 GERANIUM CIRCLE | ; | | 26 GERANIUM C | IRCLE | |
| City | State | Zip | City | State | Zip |
| CRANSTON | RI | 02910 | CRANSTON | RI | 02910 |
| Secretary Name | | | Treasurer Name | | |
| ANTGIGONE TSIMIKAS | | _ | SOTERIOS TSIM | IKAS | |
| Street Address 26 GERANIUM CIRCLE | ; | | Street Address 26 GERANIUM CI | IRCLE | |
| City | State | Žiρ | ·Ciny | State | Zip |
| CRANSTON | RI | 02910 | CRANSTON | ·RI | 02910 |
| 9. NAMES AND ADDRESS Director Name | SES OF THE DIR | ECTORS ("X" BOX FO | RATTACHMENT) FILL Director Name | N SPACES BEFORE USING | ATTACHMENTS |
| SOTERIOS TSIMIKAS | | | ANTIGONE TSIM | IKAS | |
| Street Address | | | Sireet Address | | - . |
| 26 GERANIUM CIRCLE | | | 26 GERANIUM C | IRCLE | |
| City | State | Zip | City | State | Zip |
| CRANSTON | RI | 02910 | CRANSTON | RI | 02910 |
| Director Name | | | Director Name | • | |
| Street Address | - | • •• | Street Address | | |
| City | State | `Zip | City | State | Zip |
| 10. SHARES AUTHORIZE AUTHORIZED SHARES | CD ("X" BOX FOR | ATTACHMENT) | 11. SHARES ISSUED (| "X" BOX FOR ATTACHMEN | ים תי |
| Number of Shares | Class/Series | Par Value | Number of Shares | Class/Series | Par Value |
| | | | 100 | COMMON | 10 |
| This report must be signe | d in ink by eith | er the President, Vice | President, Secretary, As | sistant Secretary, Treas | urer, Receiver or Truste |
| 2 0 3 | 5 | | | perjury, I declare and affirm ing any accompanying sche | |
| 10005 000 44/05/05 44 | . 50 00 444 | | | ents contained herein are tr | |

SOTERIOS TSIMIKAS

Print or Type Name of Officer

PRESIDENT

Title of Officer Form 630 12/01



FOR SECRETARY OF STATE USE ONLY

Matthew A. Brown, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401.222.3040

| | e of Corporation L'S PIZZA, INC. | , | | |
|--|-----------------------------------|--|-----------------------|---------------|
| 1. Corporate ID No. 2035 BAS 3. Street Address Principal Business Office 1270 CRANSTON STREET | | <u> </u> | | |
| 2035 BAS 3. Street Address Principal Business Office 1270 CRANSTON STREET | | | | |
| 3. Street Address Principal Business Office 1270 CRANSTON STREET | IL 3 FIZZA, INC. | | | |
| 1270 CRANSTON STREET | _ | City | *State | 'Zip |
| 4 Rusiness Phone No. | | CRANSTON | RI | 02720- |
| T. Dasiness I hore tro. | 15. State of Inc | · · | • • | 6. SIC Code |
| 4019464480 | RHODE I | | | 3081 |
| 7. Brief Description of the Character of Bu RESTAURANT AND BEER AND WI | | nd | | ••• |
| 8. NAMES AND ADDRESSES OF 1 | THE OFFICERS ("X" BOX | FOR ATTACHMENT) [] FILL IN S | SPACES BEFORE USING A | TTACHMENTS . |
| President Name | | Vice President Name | | _ |
| SOTERIOS TSIMIKAS | | · ANTIGONE TSIM | IKAS | |
| Street Address | | Street Address | | |
| 26 GERANIUM CIRCLE | | . 26 GERANIUM C | IRCLE | |
| City State | Zip | Ciny — | State | Zip |
| CRANSTON RI | 02910 | - CRANSTON | RI | 02910 |
| Secretary Name | | Treasurer Name | | |
| ANTIGONE TSIMIKAS | | SOTERIOS TSIMI | KAS | |
| Street Address | | Street Address | | |
| 26 GERANIUM CIRCLE | | .26 GERANIUM CI | RCLE | |
| City State | Ziρ | City | State | Zip |
| CRANSTON RI | 02910 | CRANSTON | RI | 02910 _ |
| 9. NAMES AND ADDRESSES OF T Director Name | THE DIRECTORS ("X" BO | OX FOR ATTACHMENT) FILL II , Director Name | N SPACES BEFORE USING | ATTACHMENTS . |
| SOTERIOS TSIMIKAS | | ANTIGONE TSIM | IKAS | |
| Street Address | • | Street Address | · - · · · | |
| 26 GERANIUM CIRCLE | | 26 GERANIUM CI | IRCLE | |
| City State | Zip | ·City | State | Zip |
| CRANSTON RI | 02910 | CRANSTON | RI | 02910 |
| Director Name | | Director Name | | |
| Street Address | | Street Address | | |
| City State | Zîp | .Ciry | `State | 'Zip |
| | | | | |
| 10. SHARES AUTHORIZED ("X") | 30X FOR ATTACHMENT) | 11. SHARES ISSUED (| "X" BOX FOR ATTACHMEN | <i>か</i> ロ |
| AUTHORIZED SHARES | | ISSUED SHARES | | |
| Number of Shares Class/Si | eries Par Value | Number of Shares | Class/Scries | Par Value |
| | | 100 | COMMON | 10 |
| | | | | - |
| | | 100 | COMMON | 10 |

PRESIDENT

Form 630 12/01

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



| | BLACK) | | | | |
|---------------------------------------|--|---|---|--------------------------|-------------|
| Corporate ID No. 2035 | 2. Name of Corpora | | | | |
| Street Address Principal Rust 1270 Cl | RANSTON S | ア. | CRANSTON | State | 02920 |
| iusiness Phone No. 401-946-4 | 1480 | 5. State of Incorporation RHODE ISLAI | | | 6. SIC 64 |
| Brief Description of the Char | acter of Business Conducted to A + BEEA | Rhode Island | | | |
| NAMES AND ADDE | ESSES OF THE OFFI | CERS ("X" BOX FOR ATTA | CHMENT) FILL IN SPACES | BEFORE USING ATTAC | HMENTS |
| SOTERIOS | JSIMIKA | ·S | • | - TSIMIK | ₩ <u></u> |
| | vium Cin | | 26 GERAN | 110m Cinc | .LE |
| CRANSTO | v RT | 02910 | CRANSTON | State | 02910 |
| retary Name | E. TSIMI | KAS | So TERIOS Street Address | TSIMIKAS | |
| , | State | Zip | City | State | |
| | | | | | Zip |
| ector Name | · · · | · • · · · · · · · · · · · · · · · · · · | TACHMENT) [FILL IN SPACE Director Name | · - · — — | _ |
| et Address | _TS/mika | | Street Address | TSIMIKA | |
| / | State C16 | Zio | : 26 GENA | NIUM (16 | LCLE |
| RANSTON | RI | :02910 | C NANSTON | RI | 62910 |
| et Address | · - · | | Street Address | | |
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| SHARES AUTHORI | ZED ('X' BOX FOR ATT | CHMENT) | 11. SHARES ISSUED | ("X" BOX FOR ATTACHMENT) | |
| | Class/Serles | Par Value | Number of Shares | Class/Series | Par Value |
| mber of Shares | | | | (C) as an | 10.00 |
| 100 \$10.00 PA | R VAL | | | _ Common | |

| | * 2 0 3 5 * |
|------------|-------------|
| 'ile Date: | 11-2-0 |
| | |

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.

Solution Terrifles 10-12-01

Jo TERIOS TSIMIKAS
Print or Type Name of Officer

PRESIDENT
THE OF OFFICER

(FORM MUST BE TYPED IN BLACK)

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



| 1. Corporate ID No. | 2. Name of Corporation | | | | |
|---|------------------------|--|--|------------------------|-------------------------------------|
| 2035 | BASIL'S PIZZ | A, INC. | | | |
| 3. Street Address Principal Business | Office | | City | State | Zip |
| 4. Business Phane No. 1270 C 401-946-4480 7. Brief Description of the Character | | S. State of Incorporation RHODE ISLAND de island | Cranston | R.I. | 02720 6. SIC Code 3081 |
| • | andwich restau | irant | MENT) FILL IN SPACES Vice President Name | S BEFORE USING ATTA | CHMENTS |
| Soterios Tsin | nikas | | Antigone Tsi Street Address | m ok as | |
| 26 Geranium (| Circle State | ZIp | 26 Geranium C | ircle State | Zip |
| Cranston . Secretary Name | R,Ⅲ, | 02910 | Cranston, R. Treasurer Name | R.I. | 02910 |
| Antigone Tsin | nikas | | Soterios Tsim | ákas | |
| City | State | Zip | City | State | Zip |
| 9. NAMES AND ADDRES | SES OF THE DIRECT | ORS ("X" BOX FOR ATTAC | CHMENT) FILL IN SPACE | CES BEFORE USING ATT | ACHMENTS |
| Soterios Tsima Street Address | ikas | | Antigone Ts | imikas | |
| 26 Geranium C | ircle State | Zíp | 26 Geranium | n Circle State | Zip |
| Cranston, | RI, | 02910 | Cranston, Director Name | R.I. | 02910 |
| Street Address | | | Street Address | | |
| City | State | Zip | Clty | State | Zip |
| 10. SHARES AUTHORIZE AUTHORIZED SHARES | D ("X" BOX FOR ATTACH | MENT) | 11. SHARES ISSUED | ("X" BOX FOR ATTACHMEN | TT) |
| Number of Shares | Class/Series | Par Value | Number of Shares | Class/Series | Par Value |

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

100



100 \$10.00 PAR VAL

FOR SECRETARY OF STATE USE ONLY

Soterios Tsimikas Print or Type Name of Officer President. Title of Officer

Common

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.



10.00



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

| STOP |
|-----------------------------|
| PLEASE READ INSTRUCTIONS |
| EXTRUCTIONS |
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| Filing Period: January | / 1-March 1 • | Filing Fee: \$50.00 | | | INSTRUCTI |
|----------------------------------|---------------------------------------|---------------------------|-------------------------------|-------------------------|-------------------------|
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| Corporate ID No. | 2. Name of Corporat | | | | |
| 2035 | LOGG | ZA, INC | City | State | Zip |
| 1270 (| b 40 /0 | - | Change | Rot. | 0292 |
| Business Phone No. | - Constant | S. State of Incorporation | | | 6. SIC Code |
| 946- | -4480 | RHODE ISLAND | • | | 3081 |
| Brief Description of the Charges | or of Business Conducted In | n Rhode Island | | | |
| 81 | 200 + 50 | andwich | Restaurant | | |
| NAMES AND ADDRES | SES OF THE OFFI | CERS ("X" BOX FOR ATTAC | HMENT) FILL IN SPACES BEF | ORE USING ATTACH | MENTS |
| sident Name | · · · · · · · · · · · · · · · · · · · | - 4 | Vice President Name | · · · 1 | |
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| et Address 11 | | 0 - 0 | Street Address | 1 | 0.0 |
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| | State | Zip | CU | State () | 02910 |
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| retary Name | | 1 | Treasurer Name | · | 1/2 |
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| y | State | Zip | City | State | Zip |
| | | | : | PEOPE LICING ATTA | TIMENTS : |
| | SSES OF THE DIRI | ECTORS ("X" BOX FOR ATT | Director Name | EFORE USING ATTA | U CHWIEIVIS |
| rector Name | <i>T</i> | b | Cartin | Term | mar . |
| Solerios_ | _Tseme | 1.000 | Street Address | ome | |
| 26 11000 | rium Ce | | 26 Hora | min Ci | 2-80 |
| n | Siajon (| Zip | : Cily | State | Zip |
| raneton | 10/9- | 03910 | Cramson | 1 20 A. | 0291 |
| ector Name | | , | Director Name | | |
| | | | : | | |
| eet Address | | - · | . Street Address | | |
| | | | ; | | |
| r | State | Zip | Clty | State | Zip t |
| | | ~ . | · | | |
| SHARES AUTHORIZI | ED ("X" BOX FOR ATT | ACHMENT) C. | 11. SHARES ISSUED ('X' | BOX FOR ATTACHMENT) | |
| THORIZED SHARES | | <u> </u> | ESUED SHARES | | |
| mber of Shares | Class/Series | Par Value | Number of Shares | Class/Series | Par Value |
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| 100 \$10.00 PAR VAL | • · | | | - Comondo | <u>~</u> _/0 <u>-00</u> |
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| is report must be sig | ned in ink by eitl | her the President, Vice | President, Secretary, Assista | nt Secretary, Treasu | rer, Receiver or Tru |
| _ | | | | | |
| 4 18021 | | 1 | | | _ _ |
| | | T ţ | | | |
| | | li | Under penalty of perius | ry I declare and affirm | that I have examined |

| | * 2 0 3 5 * | | Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and |
|---------------|-------------------|---|---|
| | Whole aa . | | that all statements contained herein are true and correct. |
| File Date: | 1600 | X | Schenist Trimituy 1-14-99 Signature of Officer |
| Check No.: | 1019 | | Soterios TsiniKus |
| Ву: | · · · | | Print or Type Name of Officer P.G. S. J. do N.T. |
| FOR SECRETARY | OF STATE USE ONLY | | Title of Officer |



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

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1998

401-277-3040

Filling Period: January 1-March 1 • Filing Fee: \$50.00 (FORM MUST BE TYPED IN BLACK) I. Corporate ID No. 2. Name of Corporation 2035 BASIL'S PIZZA, INC Zip RHODE ISLAND 3081 7. Brief Description of the Character of Business Conducted in Rhode Island 8. NAMES AND ADDRESSES OF THE OFFICERS (*x* BOX FOR ATTACHMENT) Vice President Name Zip City State City Zip 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) Street Address Street Address ZIP City State City State Zip 10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ISSUED SHARES AUTHORIZED SHARES Par Value Class/Series Number of Shares Number of Shares Class/Sertes Par Value 100 100 \$10.00 PAR VAL

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

| * 2 0 3 5 * | Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and |
|---------------------------------|---|
| 1-110 | that all statements contained herein are true and correct. |
| File Date: | Sotonal Templay 1598 Signature of Officer |
| Check No.: | Saterias Tsinikus |
| | Print or Type Name of Officery |
| FOR SECRETARY OF STATE USE ONLY | Tile of Officer |
| | Form 3i 12/96 |



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

2035

BASIL'S PIZZA, INC.

| 3. | Street Add | dress Principal Bus | iness Office |
|----|------------|---------------------|--------------|
| | 1270 | Cranston | Stree |

State

RI

x 02920

6. SIC Code 3081

S. State of Incorporation RHODE ISLAND

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

Pizza Restaurant

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

City

City

Soterios Tsimikas

Vice President Name

Cranston

Antigone Tsimikas

Street Address

26 Geranium Circle

Zip

ZIP

Street Address

26 Geranium Circle

Zip

Cranston

State RI

02920

City Cranston State R.I.

02920

Secretary Name

Antigone Tsimikas

Street Address

City

Treasurer Name

Socerios Tsimikas

Street Address

same

same

State

Zip

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

Director Name

Soterios Tsimikas

Antigone Tsimikas

Street Address

26 Geranium Circle

Street Address

Director Name

26 Geranium Circle

City Cranston State

State

Director Name

02920

Cranston

R.I.

02920

City

Street Address

Street Address

City

State

Zip

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

State

AUTHORIZZED SHARES Number of Shares

Class/Series

Zip

ISSUED SHARES

Number of Shares

Class/Series

100 \$10.00 PAR VAL

100

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





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.

Title of Officer

PROFIL CORPORATION **ANNUAL REPORT**

1996



State of Knode Island and Providence maniations 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

| 1 CORPORATE ID NO | 2 NAME OF CORPORATION | PLEASE TYPE OR | PRINT IN BLACK INK. | | |
|---|-----------------------------------|---------------------------|-------------------------|-----------------|--------------|
| ļ | | | | | |
| 2035 | į. | S PIZZA, INC. | Tary | a varie | The Add A |
| 1 | | _ | | | ZP C006 |
| 1270 C1 4 BLISINESS PHONE NO. 401—946 | RHIUSTON ST | / . | CRANSTO | ON RJ. | 02920-7318 |
| 4 BUSINESS PHONE NO. | _ \ | 5 STATE OF INCORPORATION | | | 6 SIC CODE |
| 411-946 | -448U | RHODE IS | SLAND | | 3081 |
| 7 BRIEF DESCRIPTION OF THE CHARACTER | OF BOS NESS CONCUCTED IN RHODE 'S | AND | | | |
| i / | Sizza R | estamant | 5 | | |
| | | | ESSES OF THE O | FFLGERS | |
| PRESIDENT NAME | | | VICE PRESIDENT NAME | | |
| SoteRios | SimiKAS_ | | STREET ADDRESS 90 NC | , Tsimi | KA 5 |
| CRANSTON | um Check | | 1 2/2 Gor | ANIUM C | ierla |
| ary | STATE | ZIP CODE | ary | STATE | ZIP CODE |
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| SEUNE IANY NAME | | | "] TREASURER NAME | | |
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| i | 9. NAM | IES AND ADDR | ESSES OF THE D | I R E C T O R S | |
| J RECTOR YAME | | | 10 RECTOR NAME | | * |
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| STHEET ADDRESS | | B | 1 | | |
| 1 16 Heron | um lice | الد | all | Same Isiaie | |
| 1 16 Heran Cranston | I STATE R.Q | AP CODE | i DTY ∠ | STATE | ZIP COOE |
| CIPECTOR NAME | 1,00 | 00110 | DIRECTOR VAVE | | |
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| STRÉET ADDRESS | | | STREET ADDRESS | | |
| ! | | | ; | | |
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| | AUTHORIZED SHARES | | | ISSUED SHARES | |
| NUMBER OF SHARES | CLASS / SERIES | PAR VALUE | NUMBER OF SHARES | CLASS / SEPRES | PAR VALUE |
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| ! <u></u> | | | 1 | . ! | <u> </u> |
| | Thia | report must be SIF | SNED IN INK by either t | ho | |
| | 11112 | report must be sit | MAPP HA HAK DA GIDIGLI | i i c | |

President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

DETACH DOTTOM DEFORE DETURNING



| ~ | | - | Under penalty of perjury. I declare and affirm that I I report, including any accompanying schedules and s all statements contained herein are true and correct. | |
|------------|-------------------------------|--------|--|-------------|
| File Date: | 1/31/96 . | i | Saterial Tempial Signature of Officer | |
| Check No: | 1171 | ! 1 | So Terios Tsinikas Print or Type Name of Officer | i |
| By: | r Secretary of State Use Only | | Title of Officer | |

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 1 Filing Fee \$50.00

Make Checks Payable to: Secretary of State

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

| 0002035 Corporate ID: | Annual Report for the year: |
|---|--|
| BASIL'S PIZZA, INC | |
| Name of Corporation: Business entity organized under the laws of the State of: Rhode Islan | d Business Entitude (about 202) |
| For foreign entity, address and telephone number of principal office: | Business Entity is (check one): [X] Business Corporation (See RIGL Chapter 7-1.1) |
| Two two-gir energy, address and telephone number of principal office. | [] Professional Service Corporation (See RIGL Chapter 7-5.1) |
| | [] Professional Service Corporation (See RIOL Chapter 7-3.1) |
| | Brief statement of the character of business conducted in Rhode Island: |
| Phone: () | Manufacture, preparation and sale of |
| Address and telephone of the principal office of business entity in Rhode | food and other goods customarily |
| Island (Provide street address - Not P.O. Box): 1270 Cranston Street | sold in restaurants. |
| Cranston, R.I. 02020 | |
| | |
| Phone: (401) 946-4430 | |
| | |
| | THE OFFICERS ARE: |
| 31K4. | TADDRESS CITY/STATE ZIP CODE |
| | anium Circle Cranston, R.I. |
| JIRII, | Zar Cont. |
| | TADDRESS CITY/STATE ZIPCODE |
| | ane Same |
| | TADDRESS CITY/STATE ZIP CODE |
| Soterios Tsimikas Sa | ime Same |
| THE NAMES OF | THE DIRECTORS ARE: |
| NAME STREET | FADDRESS CTTY/STATE Z/P CODE |
| Soterios Tsimilas 26 Cer | ranium Circle Cranston P.I. |
| A . A | |
| | Ame Same |
| 51 KEEL | TADDRESS CITY/STATE ZIP CODE |
| NUMBER OF SHARES AUTHORIZED (Rider may be attached) | NUMBER OF SHARES ISSUED AND OUTSTANDING (Rider may be attached) |
| Number of Shares 199 Class / Series a | |
| Number of Shares 179 Class / Series Common | Number of Shares Class / Series Common |
| | 100 Common |
| | |
| | |
| | <u>, </u> |
| Date 5- 8- 19 95 By/ | Saterial Temper |
| / V | |
| | OR TYPE NAME OF OFFICER SIGNING OFFICER SIGNING |
| | |
| | AGENT FOR SERVICE OF PROCESS: |
| PLEASE NOTE: If the registered office and/or registered agent indicated be | low is incorrect, Form 9 must be filed. |

SOTERIOS (SAM) TSIMIKAS 1270 CRANSTON STREET CRANSTON RI 02920

FILED MAY 1 0 1995

By ce 1056

Filing Fee \$50.00 Payable to: Secretary of State

PLEASE TYPE or PRINT

File Annually LLC, Sept. I - Nov. I CORP: Jan. I - March I

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

| Corporate ID: | Α | nnual Report for the year | 199 | 4 |
|--|----------------------|--|--|--------------------|
| • | | BASIL'S PIZZ | | |
| Name of Business Entity: | | | | |
| Business entity organized under the laws of the State of R | hode Island | Business Entity is (check | one); | |
| | | (XX) Business Cor | poration (See RIGL Chapter | 7-1 () |
| Federal Taxpayer Identification Number: | | | Service Corporation (See RIG | • |
| For foreign entity, address and telephone number of princip | nal office: | | thty Company (See RIGL 7- | |
| | | Name, title and mailing a communications may be | ddress of contact person to w directed: | rnom |
| | | • | kas President | |
| · | | 26 Geramoim Ci | rcle, Cranston, | R.T. |
| Pitone. () | | | | |
| Address and telephone of the principal office of business er | nuty in Rhode | | | |
| Island (Provide street address - Not P.O. Box): | , | Brief statement of the cha | iracter of business conducted | Lin Rhode Island: |
| 1270 Cranston Street | | | eparation and sal | |
| Cranston, R.I. 02920 | | | goods customarily | sold in |
| | | restaurants. Date of Organization: | June 15, 1984 | |
| Phone: () 946-4480 | | • | lo business in Rhode Island (| if foreign entity) |
| Priode: V | | | _ | |
| | HE NAMES OF THE | OFFICEDS ADE. | | |
| CHIEF EXHIUTIVE DEFICER OR PRESIDENT (Check One) | STREET ADDRE | \$5 | CHARAIL | Z:P CODE |
| Soterios Tsimikas | 26 Geranium | | Cranston, R.I. | ZIPICÓDE |
| Antigone Tsimikas | strlet adore Same | :55 | Same | 2.P (*GDE |
| ☐ CUSTODIAN OF RECORDS OR ☐ SECRETARY (Check One) | STREET ADDRE | ** | CITYSTAIL | 332 CODE |
| Antigone Tsimikas | Same STREET ADDRE | <u>ee</u> | Same Constate | £P CODE |
| Soterios Tsimikas | Same | 1,100 | Same | 0.000 |
| TI | HE NAMES OF THE | DIRECTORS ARE: | | ZIP CODE |
| Soterios Tsimikas | 26 Ceranium | | ranston, R.I. | zie Cob. |
| NAME | STREET ADDRE | | CHYSTAR. | 71P CODE |
| Antigone Tsimikas | Same STREET ADDRE | | Same | 7JP CODE |
| NAME | STREET AUDRE | 335 | CHACKIE | ZIF CODE |
| NUMBER OF CHARES ALITHORIZED OF A DECEMBER | | NUMBER OF SHARES ISS | UED AND OUTSTANDING | G (If Applicable) |
| NUMBER OF SHARES AUTHORIZED (If Applicable) | + | | | |
| NUMBER 199 | 1 | NUMBER 100 | | |
| CLASS | į. | CLASS Commo | n | |
| Common SERIES | : | SERIES | | |
| SERIES | ; ` | Sakins | | |
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| WITHOUT PAR | <u>:</u> ` | WITHOUT PAR | ••• | |
| 4 | . | , | • | |
| Date | | oteriés. | Tsimilar | |
| | / s | oterios Tsimikas, | · - | |
| | | NAME OF OFFICER SIGNING | | |
| | TOTAL BLOCK OFFICE | TER CICL NO | | · |
| | ., it is de Geek | en altigation | | |
| Form 31 - 1/94 | | | | |
| DESIGNATED REGIST | ERED OR RESIDEN | T AGENT FOR SERVI | CE 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.

SOTERIOS (SAM) TSIMIKAS 1270 CRANSTON STREET CRANSTON RI 02920 FILED

JUN 1 6 1994

By Alm Cke 1432

\$50.00

State of Rhode Island and Frovidence Flantations CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

| | FROTUEN | CE, RHODE ISLA | (IND 02903 | | |
|---------------------|---|---|----------------------------|--|--|
| 002035 | | | Annual Rep | ort for the yea | r1993 |
| | .• • | 5A | • | • | |
| name of the corp | oration is | *************************************** | | | |
| is incorporated a | under the laws o | of Phod. | . Talond | •••••••••• | |
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| aracter of busines | s, briefly stated | , is ^{manu} . | racture, | preparati | on and sale of |
| f) | ood and ot | her good | s customa | rily sold | in restaurants |
| foreign corporat | ion, address of | its principal | office | | |
| iness address in R | hode Island | 1270 Cr | anston-St | Cransto | n, R.I. 02920 |
| mes and addresses | | | | ss (including number, | (Attach rider if necessary |
| Tsimikas | Directo | r26. | Geranium | n Circle, | Cranston, R.I. |
| Tsimikas | Directo | r Sa | me | • | |
| | Directo | ır | | | |
| | | | me | | |
| | | | | | |
| | | | | | |
| | | • | | *************************************** | |
| Tsimikas | I reasur | erSa. | де | | •••••• |
| Number of Shares | authorized: | | | | Par Value or statement that |
| | Class | | Series | | shares are without par value |
| | Common | _ | | | \$10.00 |
| | | PAID | _ | 1. 1 | |
| umber of Shares | issued: | , oo 0 6 10 | 193 | 130 | Par Value |
| | | APN - | TATE | (Del D | or statement that shares are without |
| | Class | SEC.A O. | Series | \bigcirc \bigcirc | par value |
| | Common | | | | \$10.00 |
| 2-3- | 19 93 | (Name of Co | orporation) | | |
| | | By <i>SQ</i> | terus | Tsun | rijlas |
| must be signed by a | n officer) | | Pre | Siden | A. |
| | name of the corporated user aracter of busines for foreign corporate iness address in Rumes and addresses Name Tsimikas Tsimikas Tsimikas Tsimikas Tsimikas Number of Shares umber of Shares | name of the corporation is is incorporated under the laws of aracter of business, briefly stated food and ot foreign corporation, address of iness address in Rhode Island mes and addresses of its directors Name Off Traimikas Directors Directors Directors Traimikas Directors Directors Traimikas Preside Traimikas Preside Traimikas Secreta Traimikas Secreta Traimikas Treasur Number of Shares authorized: | name of the corporation is | Annual Rep name of the corporation is SASIL'S FIZ Is incorporated under the laws of Rhode Island- aracter of business, briefly stated, is Manufac ture, food and other goods customa If foreign corporation, address of its principal office. Ines and addresses in Rhode Island 1270 Granston St Ines and addresses of its directors and officers: Name Office Addre Tsimikas Director 26 Geranium Tsimikas Director Same Director Tsimikas President Same Tsimikas President Same Tsimikas Secretary Same Tsimikas Secretary Same Tsimikas Treasurer Same Number of Shares authorized: Class Series Common PAID APR 16 1993 APR 16 1994 APR 1 | Annual Report for the yea name of the corporation is SASIL'S FILTA, INC. It is incorporated under the laws of Rhode Island aracter of business, briefly stated, is Manufac ture, preparati food and other goods customarily sold If foreign corporation, address of its principal office. In iness address in Rhode Island 1270 Cranston St., Cranston In iness and addresses of its directors and officers: Name Office Address (including number, Tsimikas Director 26 Geranium Circle, Tsimikas Director Same Director Tsimikas President Same Tsimikas President Same Tsimikas Secretary Same Tsimikas Treasurer Same Number of Shares authorized: Class Secretary Same Common PAID APR 16 1993 APR 16 1994 APR 16 1994 APR 16 1994 APR 16 1994 A |

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

| Corporate ID 203 | 15 | Annual Report for t | he year 1992 |
|--------------------------------|----------------------------------|---|--|
| FIRST: The name of | of the corporation is | BASIL'S PIZZA, INC. | ······································ |
| SECOND: It is inco | rporated under the laws of | Rhode Island | |
| | • | Manufacture, preparationarilly sold in res | |
| FOURTH: If foreign | corporation, address of its p | principal office | ······································ |
| FIFTH: Business ad | dress in Rhode Island | 270 Cranston Street, | Cramston, R.I. 02920 |
| SIXTH: Names and | addresses of its directors an | | (Attach rider if necessary |
| Soterios T | simikas Director | 26 Geranium Circle | Cranston, R.I. |
| Antigone Ts | imikas Director Director | 26 Geranium Circle | Cranston, R.I. |
| Soterios Tsim Antigone Tsim | | Same Same Jent | |
| Antigone Tsim | ikas Secretary | Same | |
| Soterios Tsimi | kas Treasurer | Same | |
| SEVENTH: Number | of Shares authorized: | | Par Value or statement that shares are without |
| No of Shares | Comm S_{2d} | Series | par value \$10.00 |
| EIGHTH: Number of | of Shares issued: Class Rec'd & | CCA 89476 Filed "Scries 9 1992 | Par Value or statement that shares are without par value |
| 100 | Common | - | \$10.00 |
| | r 16. 19 92 | BASIL'S PIZZA, (Name of Corporation) By State of TSa | INC. |

(Report must be signed by an officer)

State of Rhode Island and Providence Plantations Corporations division 100 North main street PROVIDENCE, RHODE ISLAND 02903

| Corporate ID | 0002035 | Annual Report for | the year 1991 |
|---------------------|------------------------------------|----------------------|--|
| FIRST: The name o | f the corporation is | BASIL'S PIZZA | , INC |
| SECOND: It is incor | porated under the laws ofRh | node Island | |
| THIRD: Character of | of business, briefly stated, is | lanufacture, prepara | tion and sale |
| of fac | ed and other goods customs | urily sold in restau | rants. |
| FOURTH: If foreign | corporation, address of its princ | | |
| FIFTH: Business add | dress in Rhode Island 2121 | • | wick, R.I. |
| SIXTH: Names and | addresses of its directors and off | | (Attach rider if necessary |
| Soterios Tsimikas | Director | 26 G eranium Circ | le Cranston, R.I. |
| Antigone Tsimikas | Director | Same | |
| | Director | | |
| Soterios Taimikas | President | Same as above | |
| Antigone Tsimikas | Vice President | Same | |
| Antigone Tsimikas | Secretary | Same | |
| Soterios Tsimikas | Treasurer | Same | |
| Seventh: Number | of Shares authorized: | | Par Value or statement that |
| No. of Shares | Class | Series | shares are without par value |
| 100 | Common | | \$10.00 |
| Еіднтн: Number o | f Shares issued: | SEOMAY | Par Value or statement that |
| No. of Shares | Class | Series OA | Par Value or statement that shares are without par value |
| Dated | | Basil's Pizza, Inc. | Trimissas |

(Report must be signed by an officer)

Form 31 1/85

State of Rhode Island and Providence Plantations CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

| Corporate ID | 0002035 | | Annual Report for the | year 1990 |
|-------------------|-------------------------|---------------------------|--|---|
| First: | The name of the co | rporation is | BASIL'S PIZZA, INC. | |
| SECOND: | It is incorporated | under the laws of | Shode Island | |
| Third: | | | Manufacture, prepara | |
| Fourth: | If foreign corpor | ation, address of its pri | incipal office | |
| Г ІРТН: | Business address in | Rhode Island 21 | 21 West Shore Road, | Warwick, R.I. |
| Ѕіхтн: | Names and address | ses of its directors and | | (Attach rider if necessary) |
| Soterios | Tsimikas | Director | 26 Geranium Circl | e, Cranston, R.I. |
| | Tsimikas | | 26 Geranium Circl | e, Cranston,R.I. |
| | | President | Same as above | |
| | | Vice Preside | _{nt} Same as above | |
| Antigone | Mainilean | Secretary | Same | |
| Soterios | s Tsimikas | Treasurer | Same | |
| | : Number of Sha | | Senis | Par Value or statement that shares are without par value |
| No. of Shi 100 | | Common | sens | \$10.00 |
| Еідити: | Number of Share | s issued: | | Par Value or statement that shares are without |
| No. of Sh | ares | Class | Senes | par value |
| Dated | 4 <u>-18</u> | C | Basil's Pizza, Inc Name of Corporation) Solution President | |
| (R | eport must be signed by | an officer) T | itic President | |

State of Rhode Island and Frovidence Flantations CORPORATIONS DIVISION 270 WESTMINSTER MALI. PROVIDENCE, RHODE ISLAND 02903

| Corporate ID | 2035 | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | Annual Report for the | year1989 |
|-------------------------|-------------------------------|---|---------------------------------------|--|
| First: | The name of the corpor | ation isB | Basil's Pizza, Inc. | |
| SECOND: | It is incorporated und | er the laws of | Rhode Island | |
| THIRD: | Character of business, b | oriefly stated, is | s Manufacture, prepara | tion and sale |
| ******************* | | | ood and other goods cus | stom er ily sold in |
| Fourth: | If foreign corporation | , address of its | principal office | restaurants |
| Г ІНТ Н : | Business address in Rho | de Island ² | 121 West Shore Rd., War | wick RI |
| Ѕіхтн: | Names and addresses of | its directors a | | (Attach rider if necessary) |
| Soteri | os Tsimikas | Director | 26 Geranium Circle | e,Cranston RI |
| Antigo | ne Tsimikas | Director | 26 Geranium Circle | e,Cranston RI |
| ····· | | Director | , | |
| Soteri | os Tsimikas | President | same as above | |
| Antigo | ne Tsimikas | Vice Pres | ident same as above | |
| Antigo | ne Tsimikas | Secretary | same as above | |
| Soteri | os Tsimikas | Treasurer | same as above | ····· |
| Seventh | : Number of Shares as | ithorized: | | Par Value |
| No of Sha | ires C | lass | Series | or statement that shares are without par value |
| 100 | Cor | nmon | PAID | \$10.00 |
| г. | N. 1 (C) | | · · · · · · · · · · · · · · · · · · · | D. V. |
| Еібнтн: | Number of Shares issu | ied: | SEC'Y OF STATE | Par Value or statement that shares are without |
| No of Sha | ares C | lass | Series 2 | par value |
| Dated | 10/2/ | 19 89 | Basil's Pizza, Inc | Q. . |
| | | | By sotering Tsi | miful |
| (Re | eport must be signed by an of | ficer) | By Soterios Tse Title fres Dent | |

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations CORPORATIONS DIVISION 270 WESTMINSTER MALL PROVIDENCE, RHODE ISLAND 02903

| 17 | PROVIDENCE, RI | HODE ISLAND 02903 | |
|---------------------|---------------------------------|----------------------------------|--|
| prporate ID 203 | <u>5</u> | Annual Report for the | year 1 92 |
| First: The name o | f the corporation is | BASIL'S PIZZA, INC | |
| Second: It is incor | porated under the laws of | Shods | a Island |
| THIRD: Character of | of business, briefly stated, is | Manufacture, prepara | ation and sale of |
| ••••• | food and othe | r goods customarily s | sold in restaurants. |
| FOURTH: If foreign | corporation, address of its pr | incipal office | ?K&¥& X #X \$ \$\$#X#XX |
| FifTh: Business add | dress in Rhode Island 212 | 1 West Shore Rd., Warv | vick RI |
| SIXTH: Names and | addresses of its directors and | Officers: Address (including num | (Attach rider if necessary) mber, street, zip code) |
| Soterios Tsimi | kas Director | 26 Geranium Circl | le,Cranston RI |
| Antigone Tsimi | kas Director | same | |
| | Director | | |
| Soterios Tsimi | kas President | same | |
| Antigone Tsimi | kas Vice Preside | nt same | |
| Antigone Tsimi | kas Secretary | same | ····· |
| Soterios Tsimí | kas Treasurer | same | |
| | of Shares authorized: | . | Par Value or statement that shares are without |
| No. of Shares | Class Common | PAIÐ | par value \$10.00 |
| 100 | Common | JUL 1 8 1988 | \$ 10.00 |
| EIGHTH: Number o | f Shares issued: | SEC'Y OF STATE | Par Value or statement that |
| No. of Shares | Class | Series | shares are without par value |
| red | į. | Basil's Pizza, Inc. | 14 / 12 |
| (Report must be s | | y Soterial Tsin | ristel |

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION 270 WESTMINSTER MALL PROVIDENCE. RHODE ISLAND 02903

| Corporate ID. 2035 | | | Annual Report for the year1987 | | |
|---------------------------------|--------------------------|----------------|---|--|--|
| FIRST: The name o | • | | | | |
| SECOND: It is incor | | | | | |
| THIRD: Character of | of business, briefly sta | ated, is | anufacture, prepa | ration and sale of | |
| | food and c | ther go | ods customarily s | old in restaurants. | |
| FOURTH: If foreign | corporation, address | s of its prin | cipal office2121 Wes | t Shore Rd., Warwick | |
| | | | · · | | |
| | | | | ······································ | |
| Sixth: Names and | addresses of its direc | ctors and of | | (Attach rider if necessary) g number, street, zip code) | |
| Soterios Tsimikas | Dir | ector | 26 Geranium Ci | rcle, Cranston, RI | |
| Antigone Tsimikas | Dir | ector | same | | |
| | Dir | ector | | | |
| Soterios Tsimika | as Pre | sident | 26 Gerantum Cir | cle, Cranston, RI | |
| Antigone Tsimika | as Vic | e President | same | | |
| X Antigone Tsim | ikas Sec | retary | same | •••• | |
| Soterios Tsimikas | s Tre | asurer | same | | |
| SEVENTH: Number | of Shares authorized | i : | Series | Par Value or statement that shares are without par value | |
| 100 | common | | | \$10.00 par value | |
| EIGHTH: Number of No. of Shares | f Shares issued: Class | 07/21/87 PAID | Series | Par Value or statement that shares are without par value | |
| Dated/ | 7.10-1987 | ANRE By | Basil's Pizza, ime of Corporation) Saturies e sures | | |
| (Report must be si | igned by an officer) | 15.00 15.00 | e pros | | |

State of Rhode Island and Providence Plantations CORPORATIONS DIVISION 270 WESTMINSTER MALL PROVIDENCE, RHODE ISLAND 02903

| Corporate ID 2035 | | | Annual Report for the year 1986 | | |
|---------------------------------------|---------------------|---------------------------|--|--|--|
| First: | The name of the co | orporation is BASI | IL'S PIZZA, INC. | | |
| Second: | It is incorporate | d under the laws of | Rhode Island | | |
| Third: | Character of busin | ness, briefly stated, is | Manufacture, preparat | ion and sale | |
| | of food and o | other goods cus | tomarily sold in restaur | ants. | |
| Fourth: | If foreign corpor | ration, address of its pr | rincipal office | | |
| Г ІГТН: | Business address in | Rhode Island | | | |
| •••••• | 2121 Wo | est Shore Road, | Warwick, Rhode Island | | |
| Sixth : | Names and addres | ses of its directors and | Officers: Address (including number, str | (Attach rider if necessary) | |
| Soterios | Tsinikas | Director | 26 Geranium Circle, O | anston, R.I. | |
| Antigone | e Tsimikas | Director | 26 Gernnium Circle, C | ranston, R.I. | |
| | ······ | Director | Same | | |
| Soterios | . Tsimikas | President | Same | | |
| Antigone | e Tsimikas | Vice Preside | ent Same | | |
| Antigone | Tsimikas | Secretary | | | |
| Soterios | : Tsimikas | Treasurer | Same | | |
| Seventh: | Number of Sha | res authorized: | JUN 7 1986 | Par Value or statement that shares are without | |
| No. of Sha | ra | Class | Series PAID | par value | |
| 100 | | Common | APR 1.1 1980 | 10.00 par value | |
| Еіднтн: | Number of Share | es issued: | SEC'Y. OF STATE | Par Value or statement that shares are without | |
| No. of Shar | res | Class | Series | par value | |
| 100 | | Common | | 10.00 par value | |
| Dated Fe | ebruary 11, | ** | BASIL'S PIZZA, I | Inc. | |
| | | В | By L Sotaries TSis | mijas | |
| (Report must be signed by an officer) | | | itle President | • | |

Filling Ice: \$15.00

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations Office of the secretary of state

| CORPORATE ID 2035 | Annual Report for the year1985 | | |
|---|---|---------------|--|
| FIRST: The name of the corporation | isBASIL'SPIZZA, INC | | |
| SECOND: It is incorporated under th | he laws of Rhode Island | | |
| THIRD: Character of business, briefly | y stated, is Manufacture,preparation | and | |
| sale of food and other goods cust | comarily sold in restaurants. | | |
| FOURTH: If foreign corporation, ad | dress of its principal office | | |
| FIFTH: Business address in Rhode I | Island | ,, | |
| 2121 West Shore Road, Warwic | k, Rhode Island | 1-> | |
| SIXTH: Names and addresses of its | directors and officers: | | |
| (Addresses must include street a | and number, if any) | • • | |
| Name Office | Address | | |
| Soterios Tsimikas Director | 26 Geranium Circle, Cranston, | R.I | |
| Antigone Tsimikas Director | 26 Geranium Circle, Cranston, | R.I | |
| Director | | | |
| Soterios Tsimikas President | Same | | |
| | dent Same | | |
| Antigone Tsimikas Secretary | Same | | |
| Soterios Tsimikas Treasurer (II additional space is needed, attach rider) | Same | | |
| SEVENTH: Number of Shares autho | | | |
| No. of Shares Class | or statement that shares are without Series par value | | |
| 100 Common | \$10.00 par val | .ue | |
| Eigнтн: Number of Shares issued: | : Par Value or statement that | | |
| No. of Shares Class | shares are without Series par value | | |
| 100 Common | \$10.00 par val | .ue | |
| Dated: January 23, 1985 | BASIL'S PIZZA, INC. | ·- | |
| | (Name of Corporation) | | |
| RECBIVED MAR 1985 | | •• | |
| C | (Name of Corporation) | . <u></u> | |

If the corporation has changed its registered office and/or its registered agent, Form #9 must be filed. Please contact Corporation Division for Information. 277-3040