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 OR PRINTED IN BLACK)

1. Corporate ID No.	2. Name of Corporation			
35053	PEDDLERS INN, INC.			
3. Street Address Principal Business Office		City	State	Zip
94 MIDDLE ST		PAWT	R.I.	02860
4. Business Phone No.	5. State of Incorporation			6. SIC Code
401-724-1307	RHODE ISLAND			3095

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

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

President Name	Vice President Name
C J BRADY	SAME
Street Address: 94 MIDDLE ST	Street Address:
City: PAWT. State: R.I. Zip: 02860	City: State: Zip:
Secretary Name:	Treasurer Name: SAME
Street Address: SAME	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 COMM NO PAR VALUE		

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

ISSUED SHARES

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

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

[redacted] [redacted]

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.

Charles J Brady 1/4/05
Signature of Officer *Date*

CHARLES J BRADY
Print or Type Name of Officer

PRES.
Title of Officer

[redacted]

File Date 02-25-05
Check No. 6601
By:
FOR SECRETARY OF STATE USE ONLY

Form 630 Rev. 12/03

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.	2. Name of Corporation
35 053	PEDDLERS INN

3. Street Address Principal Business Office	City	State	Zip
94 MIDDLE ST	PAWT	RI	02860

4. Business Phone No.	5. State of Incorporation	6. SIC Code
401-726-9379	R I .	

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

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

President Name	Street Address	City	State	Zip
CHARLES J. BRADY	94 MIDDLE ST	PAWT	RI	02860

Vice President Name	Street Address	City	State	Zip
SAME				

Secretary Name	Street Address	City	State	Zip
SAME				

Treasurer Name	Street Address	City	State	Zip
SAME				

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

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

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value
100	A	No Par

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

ISSUED SHARES

Number of Shares	Class/Series	Par Value
100		No Par V

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

[redacted] [redacted]

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.

Charles J Brady 11/30/04
Signature of Officer *Date*

CHARLES J BRADY
Print or Type Name of Officer

PRES/OWNER
Title of Officer

[redacted]

File Date FILED
Check No. NOV 30 2004
By: By 51136
FOR SECRETARY OF STATE USE ONLY

Form 630 Rev. 12/03

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

STOP PLEASE READ INSTRUCTIONS

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 35053
2. Name of Corporation PEDDLERS INN, INC.
3. Street Address Principal Business Office 94 MIDDLE ST — City PAWT. — State R.I. — Zip 02860
4. Business Phone No. 401-726-9379
5. State of Incorporation RHODE ISLAND
6. SIC Code 3095
7. Brief Description of the Character of Business Conducted in Rhode Island PUB

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

President Name C. J. BRADY
Street Address 94 MIDDLE ST
City PAWT — State RI — Zip 02860

Vice President Name SAME
Street Address
City — State — Zip

Secretary Name SAME
Street Address
City — State — Zip

Treasurer Name SAME
Street Address
City — State — Zip

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 100
Number of Shares — Class/Series — Par Value

11. SHARES ISSUED (*"X" BOX FOR ATTACHMENT*)
ISSUED SHARES 100
Number of Shares — Class/Series — Par Value

100 COMM NO PAR VALUE

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

[redacted]

* 35053 *

File Date: 5-13-03
Check No.: 528
By: [signature]

FOR SECRETARY OF STATE USE ONLY

[redacted]

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.

Charles J Brady 5/7/03
Signature of Officer — *Date*

CHARLES J BRADY
Print or Type Name of Officer

PRES + TREASURER
Title of Officer

5

Form 630 12/02

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

STOP
PLEASE READ INSTRUCTIONS

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.: 35053
2. Name of Corporation: PEDDLERS INN, INC.
3. Street Address Principal Business Office: 94 MIDDLE ST — City: PAWT — State: RI — Zip: 02860
4. Business Phone No.: 724-1307
5. State of Incorporation: RHODE ISLAND
6. SIC Code: 3095
7. Brief Description of the Character of Business Conducted in Rhode Island: PUB

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

President Name: C. J. BRADY	Vice President Name:
Street Address: 94 MIDDLE ST	Street Address:
City: PAWT State: RI Zip: 02860	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)* **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

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

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

100 COMM NO PAR VALUE

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

* 3 5 0 5 3 *

File Date: 1/24/02
Check No.: 428
By: GE

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.

Charles J Brady — 1/16/02
Signature of Officer — *Date*

CHARLES J BRADY
Print or Type Name of Officer

PRES.
Title of Officer

Form 630 12/01

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

STOP PLEASE READ INSTRUCTIONS

(FORM MUST BE TYPED IN BLACK)

1. *Corporate ID No.* 35053
2. *Name of Corporation* PEDDLERS INN, INC.
3. *Street Address Principal Business Office* 94 MIDDLE ST — *City* PAWT. — *State* R I — *Zip* 02860
4. *Business Phone No.* 401-724-1307
5. *State of Incorporation* RHODE ISLAND
6. *SIC Code* 3095
7. *Brief Description of the Character of Business Conducted in Rhode Island* PUB - LOUNGE

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

President Name CHARLES J BRADY
Street Address 94 MIDDLE ST
City PAWT *State* RI *Zip* 02860

Vice President Name N/A
Street Address
City *State* *Zip*

Secretary Name N/A
Street Address
City *State* *Zip*

Treasurer Name
Street Address
City *State* *Zip*

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

Director Name N/A
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	COMM	NO PAR VALUE

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

ISSUED SHARES

Number of Shares	*Class/Series*	*Par Value*
100	comm	NPV

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

[redacted] [redacted]

* 3 5 0 5 3 *

File Date: 6-7-01

Check No.: 379

By: C

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.

Charles J Brady 3/20/01
Signature of Officer *Date*

CHARLES J BRADY
Print or Type Name of Officer

PRES.
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

STOP
PLEASE READ INSTRUCTIONS

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. 35053
2. Name of Corporation PEDDLERS INN Inc
3. Street Address Principal Business Office 94 MIDDLE ST City PAWT. State RI Zip 02860
4. Business Phone No. 401-724-1307
5. State of Incorporation R.I.
6. SIC Code
7. Brief Description of the Character of Business Conducted in Rhode Island PUB

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

President Name CHARLES J BRADY
Street Address 94 MIDDLE ST
City PAWT State RI Zip 02860

Vice President Name SAME
Street Address
City State Zip

Secretary Name SAME
Street Address
City State Zip

Treasurer Name SAME
Street Address
City State Zip

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

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 100 Class/Series COM Par Value N/P/V

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

ISSUED SHARES
Number of Shares 100 Class/Series COM Par Value N/P/V

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

[redacted] [redacted]

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.

Charles J. Brady 11/22/00
Signature of Officer *Date*

CHARLES J BRADY
Print or Type Name of Officer

PRES.
Title of Officer

File Date: _____

Check No.: [redacted]

By: 401-351-7730

FOR SECRETARY OF STATE USE ONLY

[redacted]

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

STOP — PLEASE READ INSTRUCTIONS

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.	2. Name of Corporation
35053	PEDDLERS INN, INC.

3. Street Address Principal Business Office	City	State	Zip
94 MIDDLE ST	PAWT	RI	02860

4. Business Phone No.	5. State of Incorporation	6. SIC Code
401-726-9379	RHODE ISLAND	3095

7. Brief Description of the Character of Business Conducted in Rhode Island: PUB (FOOD + DRINK)

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

President Name	Street Address	City	State	Zip
CHARLES J. BRADY	94 MIDDLE ST	PAWT	RI	02860

Vice President Name	Street Address	City	State	Zip
SAME	SAME	SAME	"	"

Secretary Name	Street Address	City	State	Zip
SAME	"	"	"	"

Treasurer Name	Street Address	City	State	Zip
SAME	"	"	"	"

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

Director Name	Street Address	City	State	Zip
N/A				

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 NO PAR COM		

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

ISSUED SHARES		
Number of Shares	Class/Series	Par Value
100	Comm	N/P/V

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

* 3 5 0 5 3 *

File Date: Jan 26, 99

Check No.: 0164

By: ID

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.

Charles J Brady 12/26/98
Signature of Officer *Date*

CHARLES J BRADY
Print or Type Name of Officer

PRES & SEC.
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

STOP
PLEASE READ INSTRUCTIONS

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.: 35053
2. Name of Corporation: PEDDLERS INN, INC.
3. Street Address Principal Business Office: 94 MIDDLE ST — City: PAWT — State: RI — Zip: 02860
4. Business Phone No.: 401-726-9379
5. State of Incorporation: RHODE ISLAND
6. SIC Code: 3095
7. Brief Description of the Character of Business Conducted in Rhode Island: RETAIL LIQ

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

President Name: C J BRADY
Street Address:
City: PAWT — State: RI — Zip: 02860

Vice President Name: SAME
Street Address
City — State — Zip

Secretary Name: SAME
Street Address
City — State — Zip

Treasurer Name: SAME
Street Address
City — State — Zip

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

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 NO PAR COM		

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

ISSUED SHARES

Number of Shares	Class/Series	Par Value
100	COM	NPV

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

* 3 5 0 5 3 *

File Date: 3/31

Check No.: 6037111682

By: KD

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.

Charles J Brady — 1/28/98
Signature of Officer — *Date*

CHARLES J BRADY
Print or Type Name of Officer

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 1997

Filing Period: January 1–March 1 • Filing Fee: $50.00

STOP: PLEASE READ INSTRUCTIONS BEFORE COMPLETING THIS FORM

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.	2. Name of Corporation		
35053	PEDDLERS INN, INC.		
3. Street Address Principal Business Office	**City**	**State**	**Zip**
94 MIDDLE ST	PAWT.	RI	02860
4. Business Phone No.	**5. State of Incorporation**		**6. SIC Code**
726-9379	RHODE ISLAND		3095
7. Brief Description of the Character of Business Conducted in Rhode Island			
PUB			

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

President Name			Vice President Name		
CHARLES J. BRADY			SAME		
Street Address			**Street Address**		
94 MIDDLE ST					
City	**State**	**Zip**	**City**	**State**	**Zip**
PAWT.	RI	02860			
Secretary Name			**Treasurer Name**		
SAME					
Street Address			**Street Address**		
City	**State**	**Zip**	**City**	**State**	**Zip**

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

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 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 NO PAR COM			100	Com	N/P/V

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

* 3 5 0 5 3 *

File Date: 2/19/97

Check No.: 04-82336 [illegible]

By: [illegible]

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: C J Brady   Date: 2/10/97

Print or Type Name of Officer: C J BRADY

Title of Officer: PRES.

PROFIT CORPORATION ANNUAL REPORT

1996

Filing Period: January 1–March 1
Filing Fee: $50.00

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

PLEASE TYPE OR PRINT IN BLACK INK.

1. CORPORATE ID NO.	2. NAME OF CORPORATION			
35053	PEDDLERS INN, INC.			
3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE		CITY	STATE	ZIP CODE
94 MIDDLE ST		PAWT.	RI	02860
4. BUSINESS PHONE NO.	5. STATE OF INCORPORATION			6. SIC CODE
726-9379	RHODE ISLAND			3095

7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND
PUB

8. NAMES AND ADDRESSES OF THE OFFICERS

PRESIDENT NAME			VICE PRESIDENT NAME		
C J BRADY			SAME		
STREET ADDRESS			STREET ADDRESS		
94 MIDDLE ST					
CITY	STATE	ZIP CODE	CITY	STATE	ZIP CODE
PAWT	RI	02860			
SECRETARY NAME			TREASURER NAME		
SAME			SAME		
STREET ADDRESS			STREET ADDRESS		
CITY	STATE	ZIP CODE	CITY	STATE	ZIP CODE

9. NAMES AND ADDRESSES OF THE DIRECTORS

DIRECTOR NAME			DIRECTOR NAME		
NONE					
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 NO PAR COM			100	COM	NO

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.

C J Brady
Signature of Officer

C J BRADY
Print or Type Name of Officer

PRES
Title of Officer

11/15/96
Date

File Date: 2/1/96

Check No: 337

By: ce/vp

For Secretary of State Use Only

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.

Corporate ID: 0095055 Annual Report for the year: 1995

Name of Corporation: PEDDLERS INN, INC.

Business entity organized under the laws of the State of: R.I.

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

Phone: (401) 726-9379

Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):
CJ BRADY
94 MIDDLE ST
PAWT. RI 02860
Phone: (401) 726-9379

Business Entity is (check one):
[X] Business Corporation (See RIGL Chapter 7-1.1)
[ ] Professional Service Corporation (See RIGL Chapter 7-5.1)

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

THE NAMES OF THE OFFICERS ARE:

PRESIDENT	STREET ADDRESS	CITY/STATE	ZIP CODE
C. J. BRADY	94 MIDDLE ST	PAWT. RI	02860
VICE PRESIDENT	STREET ADDRESS	CITY/STATE	ZIP CODE
SAME			
SECRETARY	STREET ADDRESS	CITY/STATE	ZIP CODE
SAME			
TREASURER	STREET ADDRESS	CITY/STATE	ZIP CODE
SAME			

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
N/A			
NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
NAME	STREET ADDRESS	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	Class / Series	Number of Shares	Class / Series
100	NO PAR VALUE	100	NO PAR VALUE

Date 1/2/95, 19

By: CJ Brady

PRINT OR TYPE NAME OF OFFICER SIGNING C J BRADY

TITLE OF OFFICER SIGNING PRES

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.

CHARLES J. BRADY
94 MIDDLE STREET
PAWTUCKET RI 02860

FILED
JAN 4 1995
BY DC ck. # 257

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: 350530 Annual Report for the year: 1994

Name of Business Entity: ~~FOOD + ACCESSORIES~~ Peddlers INN INC

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

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):
CHARLES J BRADY
94 MIDDLE ST
PAWT RI 02860
Phone: ( ) 726-9379

Business Entity is (check one):
- [X] 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:

Brief statement of the character of business conducted in Rhode Island:
SALE OF FOODT BEV.

Date of Organization: 7/5/85

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

THE NAMES OF THE OFFICERS ARE:

	STREET ADDRESS	CITY/STATE	ZIP CODE
☐ CHIEF EXECUTIVE OFFICER OR ☒ PRESIDENT (Check One) CHARLES J BRADY	94 MIDDLE ST	PAWT	02860
☐ CHIEF OPERATING OFFICER OR ☐ VICE PRESIDENT (Check One) //	//	//	//
☐ CUSTODIAN OF RECORDS OR ☒ SECRETARY (Check One) //	//	//	//
☐ CHIEF FINANCIAL OFFICER OR ☒ TREASURER (Check One) //	//	//	//

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE

NUMBER OF SHARES AUTHORIZED (If Applicable)	NUMBER OF SHARES ISSUED AND OUTSTANDING (If Applicable)
NUMBER 100	NUMBER
CLASS COMM	CLASS
SERIES	SERIES
PAR VALUE OR WITHOUT PAR W/O PAR VALUE	PAR VALUE OR WITHOUT PAR

Date 9/26/94, 19

By: Charles J Brady
CHARLES J BRADY
PRINT OR TYPE NAME OF OFFICER SIGNING
PRES
TITLE OF OFFICER SIGNING

Pd CK 04-540895489

Form 01 1/94

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.

Charles J. Brady
94 Middle Street
Pawtucket, RI 02860

FILED
OCT 07 1994

Filing Fee $50.00

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

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID: 0035053 Annual Report for the year 1993

FIRST: The name of the corporation is PEDDLERS INN, INC

SECOND: It is incorporated under the laws of R.I.

THIRD: Character of business, briefly stated, is PROVIDING FOOD + BEV TO THE PUBLIC

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 94 MIDDLE ST PAWT. R.I 02860

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
CHARLES J BRADY	President	94 MIDDLE ST PAWT. RI 02860
DONNA L BRADY	Vice President	" "
DONNA L BRADY	Secretary	" "
CHARLES J BRADY	Treasurer	" "

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	Common		NO PAR VALUE

CON 170

EIGHTH: Number of Shares issued:

Rec'd & Filed FEB 20 1993

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	Common		NO PAR VALUE

Dated 2/6/93 19

PEDDLERS INN INC
(Name of Corporation)

By Charles J Brady

Title Pres + Treasurer

(Report must be signed by an officer)

Form 31 1/85

Filing Fee $50.00

1619B

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

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 35053 Annual Report for the year 1992

FIRST: The name of the corporation is Pedeler's Inn, Inc.

SECOND: It is incorporated under the laws of R.I.

THIRD: Character of business, briefly stated, is Providing Food + Acmod Ben To The Public

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
Charles J. Brady	President	94 Middle St Bristol RI 02809
Donna L Brady	Vice President	" " "
Donna L Brady	Secretary	" " "
Charles J Brady	Treasurer	" " "

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	Common	[illegible]	No Par Value

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	Common		No Par Value

Dated 11/23/92 19

Peddlers Inn Inc
(Name of Corporation)

By Charles J Brady

Title Pres + Treasurer

(Report must be signed by an officer)

Form 21 - 10/91

Filing Fee $50.00

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

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

55

Corporate ID 0035053 Annual Report for the year 1991

FIRST: The name of the corporation is PEDDLERS INN, INC.

SECOND: It is incorporated under the laws of R.I.

THIRD: Character of business, briefly stated, is FOOD + BEV.

FOURTH: If foreign corporation, address of its principal office N/A

FIFTH: Business address in Rhode Island 94 MIDDLE ST
PAWT. R.I. 02860

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
C.J. BRADY	President	94 MIDDLE ST PAWT. 02860
D.L. BRADY	Vice President	"
D.L. BRADY	Secretary	"
C.J. BRADY	Treasurer	"

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	Common		NO PAR VALUE

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	Common		NO PAR VALUE

PAID
JAN 01 1991
SEC'Y OF STATE

Dated 1/3/91 19

PEDDLERS INN INC
(Name of Corporation)

By Charles J Brady

Title Pres + Treasurer

(Report must be signed by an officer)

Form 31 1/85

Filing Fee $15.00

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

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

02

Corporate ID 0035053 Annual Report for the year 1990

FIRST: The name of the corporation is PEDDLERS INN, INC.

SECOND: It is incorporated under the laws of R.I.

THIRD: Character of business, briefly stated, is PROVIDING FOOD + BEV

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 94 MIDDLE ST PAWTUCKET

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
CHARLES J BRADY	President	94 MIDDLE ST PAWT
DONNA M BRADY	Vice President	" "
DONNA M BRADY	Secretary	" "
CHARLES J BRADY	Treasurer	" "

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	Common		NO PAR

PAID
JAN 29 1990
SEC'Y. OF STATE

EIGHTH: Number of Shares issued:

No of Shares	Class	Series	Par Value or statement that shares are without par value
100	Common		NO PAR

Dated 1/25/90 19

PEDDLERS INN INC
(Name of Corporation)

By Charles J Brady

Title Pres + TREASURER

(Report must be signed by an officer)

Form 31 1/85

Filing Fee $15.00

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

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 35053 Annual Report for the year 89

FIRST: The name of the corporation is PEDDLERS Inn, Inc

SECOND: It is incorporated under the laws of R.I.

THIRD: Character of business, briefly stated, is PROVIDING FOOD + ACH BEV TO THE PUBLIC

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
CHARLES J BRADY	President	94 MIDDLE ST PAWT. RI 02860
DONNA M BRADY	Vice President	" " "
DONNA M BRADY	Secretary	" " "
CHARLES J BRADY	Treasurer	" " "

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	Common	PAID	NO PAR VALUE

SEP 25 1989
SEC'Y OF STATE

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	Common		NO PAR VALUE

Dated AUG 20 19 89

PEDDLERS Inn Inc
(Name of Corporation)

By Charles J Brady

Title Pres + Treasurer

(Report must be signed by an officer)

Filing Fee $15.00

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

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

1988

Corporate ID 0035053 Annual Report for the year 1989

FIRST: The name of the corporation is PEDDLERS INN, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is Restaurant/Lounge

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 94 Middle Street, Pawtucket, R.I. 02860

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
Charles J. Brady	President	28 Middle Street, Pawtucket, R.I. 02860
Donna M. Brady	Vice President	28 Middle Street, Pawtucket, R.I. 02860
Donna M. Brady	Secretary	28 Middle Street, Pawtucket, R.I. 02860
Charles J. Brady	Treasurer	28 Middle Street, Pawtucket, R.I. 02860

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	Common		No Par Value

PAID
MAR 20 1989
SECY OF STATE

EIGHTH: Number of Shares issued:

No of Shares	Class	Series	Par Value or statement that shares are without par value
100	Common		No Par Value

Dated February 28 1989

Peddlers Inn, Inc.
(Name of Corporation)

By Charles J Brady

Title Owner & President

(Report must be signed by an officer)

Form 31 1/85

Filing Fee $15.00

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

Corporate ID 35053 Annual Report for the year 1987 ~~1988~~

FIRST: The name of the corporation is PEDDLERS INN, INC.

SECOND: It is incorporated under the laws of STATE OF RHODE ISLAND

THIRD: Character of business, briefly stated, is RESTAURANT/LOUNGE

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island c/o David M. St. Germain, Esq. 24 Spring Street, Pawtucket, Rhode Island 02860

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
Charles J. Brady	Director	94 Middle St., Pawtucket, R.I. 02860
Donna L. Brady	Director	94 Middle St., Pawtucket, R.I. 02860
	Director	
Charles J. Brady	President	94 Middle St., Pawtucket, R.I. 02860
Donna L. Brady	Vice President	"
"	Secretary	"
Charles J. Brady	Treasurer	"

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	Common	D B	No Par Value

PAID
APR 20 1988
SECY OF STATE

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	Common		No Par Value

Dated April 6 19 88

PEDDLERS INN, INC.
(Name of Corporation)

By Charles J Brady

Title President

(Report must be signed by an officer)

Form 21 1-65

Filing Fee $15.00

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

Corporate ID 35053 Annual Report for the year 1986

FIRST: The name of the corporation is PEDDLERS INN, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is providing of food and alcoholic beverages to the public

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 94 Middle Street, Pawtucket, Rhode Island 02860

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
Charles J. Brady	President	94 Middle Street, Pawtucket, R.I. 02860
Donna M. Brady	Vice President	94 Middle Street, Pawtucket, R.I. 02860
Donna M. Brady	Secretary	Same as above
Charles J. Brady	Treasurer	Same as above

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	Common		No Par Value

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	Common		No Par Value

09/30/86 PAID
ANRE CHEK 00029001 15 00 15 00

Dated September 18 19 86

PEDDLERS INN, Inc.
(Name of Corporation)

OCT 01 ENTD

By Charles J. Brady
Charles J. Brady

(Report must be signed by an officer)

Title President and Treasurer

Form 31 1/85