



**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. 16060		2. Name of Corporation Warwick Foods, Inc			
3. Street Address Principal Business Office 1980 Warwick Avenue			City Warwick	State R. I.	Zip 02889
4. Business Phone No. 401-738-4743		5. State of Incorporation Rhode Island			6. SIC Code 3079
7. Brief Description of the Character of Business Conducted in Rhode Island Restaurant					
8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Joseph Illiano			Vice President Name None		
Street Address 1980 Warwick Avenue			Street Address		
City Warwick	State R. I.	Zip 02889	City	State	Zip
Secretary Name Joseph Illiano			Treasurer Name Joseph Illiano		
Street Address 1980 Warwick Avenue			Street Address 1980 Warwick Avenue		
City Warwick	State R. I.	Zip 02889	City Warwick	State R. I.	Zip 02889
9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Joseph Illiano			Director Name		
Street Address 1980 Warwick Avenue			Street Address		
City Warwick	State R. I.	Zip 02889	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> AUTHORIZED SHARES					
Number of Shares		Class/Series	Par Value	11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> ISSUED SHARES	
1,000 Comm No Par Value				Number of Shares	Class/Series
				100	No Par

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



1 6 0 6 0

File Date 8/18/05  
Check No. 1450  
By: DA  
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 [Signature] Date 8/10/05  
Print or Type Name of Officer  
**Joseph Illiano**  
**President**  
Title of Officer



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

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 16060		2. Name of Corporation Warwick Foods, Inc.			
3. Street Address Principal Business Office 1980 Warwick Avenue			City Warwick	State RI	Zip 02889
4. Business Phone No. 401-738-4743		5. State of Incorporation Rhode Island			6. SIC Code 3079
7. Brief Description of the Character of Business Conducted in Rhode Island Restaurant.					
8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Joseph Illiano			Vice President Name None		
Street Address 1980 Warwick Avenue			Street Address		
City Warwick	State RI	Zip 02889	City	State	Zip
Secretary Name Joseph Illiano			Treasurer Name Joseph Illiano		
Street Address 1980 Warwick Avenue			Street Address 1980 Warwick Avenue		
City Warwick	State RI	Zip 02889	City Warwick	State RI	Zip 02889
9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Joseph Illiano			Director Name		
Street Address 1980 Warwick Avenue			Street Address		
City Warwick	State RI	Zip 02889	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1,000 Comm No Par Value			100		No Par

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



1 6 0 6 0

File Date 3/18/04  
Check No. 912  
By: ls  
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.

Joseph Illiano 3/11/04  
Signature of Officer Date  
Joseph Illiano  
Print or Type Name of Officer  
President  
Title of Officer



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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 16060		2. Name of Corporation Warwick Foods, Inc.			
3. Street Address Principal Business Office 1980 Warwick Avenue			City Warwick	State RI	Zip 02889
4. Business Phone No. 401-738-4743		5. State of Incorporation Rhode Island			6. SIC Code 3079
7. Brief Description of the Character of Business Conducted in Rhode Island Restaurant.					
8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Joseph Illiano			Vice President Name None		
Street Address 1980 Warwick Avenue			Street Address		
City Warwick	State RI	Zip 02889	City	State	Zip
Secretary Name Joseph Illiano			Treasurer Name Joseph Illiano		
Street Address 1980 Warwick Avenue			Street Address 1980 Warwick Avenue		
City Warwick	State RI	Zip 02889	City Warwick	State RI	Zip 02889
9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Joseph Illiano			Director Name		
Street Address 1980 Warwick Avenue			Street Address		
City Warwick	State RI	Zip 02889	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> AUTHORIZED SHARES					
Number of Shares			Class/Series		
Par Value			ISSUED SHARES		
Number of Shares			Class/Series		
Par Value			Par Value		
1,000 Comm No Par Value			100		
			No Par		
11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					

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



1 6 0 6 0

File Date 1-30-03  
Check No. 3387  
By: UP  
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.

Joseph Illiano  
Signature of Officer  
Date 1/31/03  
Joseph Illiano  
Print or Type Name of Officer  
President  
Title of Officer



**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. **16060** 2. Name of Corporation **WARWICK FOODS, INC.**  
3. Street Address Principal Business Office **1980 Warwick Avenue** City **Warwick** State **RI** Zip **02889**  
4. Business Phone No. **401-738-4743** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **3079**  
7. Brief Description of the Character of Business Conducted in Rhode Island  
**Restaurant.**

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

President Name <b>Joseph Illiano</b>	Vice President Name <b>None</b>
Street Address <b>1980 Warwick Avenue</b>	Street Address
City State Zip <b>Warwick RI 02889</b>	City State Zip
Secretary Name <b>Joseph Illiano</b>	Treasurer Name <b>Joseph Illiano</b>
Street Address <b>1980 Warwick Avenue</b>	Street Address <b>1980 Warwick Avenue</b>
City State Zip <b>Warwick RI 02889</b>	City State Zip <b>Warwick RI 02889</b>

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

Director Name <b>Joseph Illiano</b>	Director Name
Street Address <b>1980 Warwick Avenue</b>	Street Address
City State Zip <b>Warwick RI 02889</b>	City State Zip
Director Name	Director Name
Street Address	Street Address
City State Zip	City State Zip

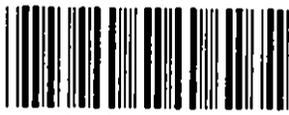
**10. SHARES AUTHORIZED (\*X\* BOX FOR ATTACHMENT)**

AUTHORIZED SHARES  
Number of Shares Class/Series Par Value  
**1,000 COMM NO PAR VALUE**

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

ISSUED SHARES  
Number of Shares Class/Series Par Value  
**100 No Par**

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



\* 1 6 0 6 0 \*

File Date: 1/31/08  
Check No.: 871  
By: [Signature]

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: [Signature] Date: \_\_\_\_\_  
**Joseph Illiano**  
Print or Type Name of Officer  
**President**

**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001**

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



(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **16060** 2. Name of Corporation **WARWICK FOODS, INC.**

3. Street Address Principal Business Office **1980 Warwick Avenue** City **Warwick** State **RI** Zip **02889**

4. Business Phone No. **401-738-4743** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **3079**

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

**Restaurant.**

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

President Name <b>Joseph Illiano</b> Street Address <b>1980 Warwick Avenue</b> City <b>Warwick</b> State <b>RI</b> Zip <b>02889</b>	Vice President Name <b>None</b> Street Address  City State Zip
---	--

Secretary Name <b>Joseph Illiano</b> Street Address <b>1980 Warwick Avenue</b> City <b>Warwick</b> State <b>RI</b> Zip <b>02889</b>	Treasurer Name <b>Joseph Illiano</b> Street Address <b>1980 Warwick Avenue</b> City <b>Warwick</b> State <b>RI</b> Zip <b>02889</b>
---	---

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

Director Name <b>Joseph Illiano</b> Street Address <b>1980 Warwick Avenue</b> City <b>Warwick</b> State <b>RI</b> Zip <b>02889</b>	Director Name  Street Address  City State Zip
--	---

**10. SHARES AUTHORIZED (\*X\* BOX FOR ATTACHMENT)**

AUTHORIZED SHARES	Class/Series	Par Value
<b>1,000</b>	<b>COMM NO PAR VALUE</b>	

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

ISSUED SHARES	Class/Series	Par Value
<b>100</b>		<b>No Par</b>

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



\* 1 6 0 6 0 \*

File Date: 5-17-01  
Check No.: 3202  
By: [Signature]

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] 5/21/01  
Signature of Officer Date  
**Joseph Illiano**  
Print or Type Name of Officer  
**President**  
Title of Officer



**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. 16060  
2. Name of Corporation Warwick Foods, Inc.  
3. Street Address Principal Business Office 1980 Warwick Avenue  
City Warwick State RI Zip 02889  
4. Business Phone No. 738-4743  
5. State of Incorporation Rhode Island  
6. SIC Code 3079

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

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

President Name Joseph Illiano Street Address 1980 Warwick Avenue City Warwick State RI Zip 02889 Secretary Name Joseph Illiano Street Address 1980 Warwick Avenue City Warwick State RI Zip 02889	Vice President Name  Street Address  City State Zip Treasurer Name Joseph Illiano Street Address 1980 Warwick Avenue City Warwick State RI Zip 02889
--	---

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

Director Name Joseph Illiano Street Address 1980 Warwick Avenue City Warwick State RI Zip 02889	Director Name  Street Address  City State Zip
---	---

**10. SHARES AUTHORIZED (\*X\* BOX FOR ATTACHMENT)**

AUTHORIZED SHARES	Class/Series	Par Value
2000		no par

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

ISSUED SHARES	Class/Series	Par Value
100		no par

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

File Date

Check No.

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.

Signature of Officer

Joseph Illiano

Print or Type Name of Officer

President

Title of Officer

8/29/00



**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR** 1999  
Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 16060 2. Name of Corporation Warwick Foods, Inc.  
3. Street Address Principal Business Office 1980 Warwick Avenue City Warwick State RI Zip 02889  
4. Business Phone No. 738-4743 5. State of Incorporation Rhode Island 6. SIC Code 3079

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

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

President Name <u>Joseph Illiano</u>	Vice President Name
Street Address <u>1980 Warwick Avenue</u>	Street Address
City <u>Warwick</u> State <u>RI</u> Zip <u>02889</u>	City _____ State _____ Zip _____
Secretary Name <u>Joseph Illiano</u>	Treasurer Name <u>Joseph Illiano</u>
Street Address <u>1980 Warwick Avenue</u>	Street Address <u>1980 Warwick Avenue</u>
City <u>Warwick</u> State <u>RI</u> Zip <u>02889</u>	City <u>Warwick</u> State <u>RI</u> Zip <u>02889</u>

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

Director Name <u>Joseph Illiano</u>	Director Name
Street Address <u>1980 Warwick Avenue</u>	Street Address
City <u>Warwick</u> State <u>RI</u> Zip <u>02889</u>	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
	<u>2000</u>		<u>no par</u>

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

ISSUED SHARES	Number of Shares	Class/Series	Par Value
	<u>100</u>		<u>no par</u>

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

File Date 9/16/00  
Check No. 186920000  
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.

Signature of Officer Joseph Illiano Date 8/29/00  
Print or Type Name of Officer Joseph Illiano  
President  
Title of Officer



**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. 16060  
 2. Name of Corporation Warwick Foods, Inc.  
 3. Street Address Principal Business Office 1980 Warwick Avenue  
 City Warwick State RI Zip 02889  
 4. Business Phone No. 738-4743  
 5. State of Incorporation Rhode Island  
 6. SIC Code 3079

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

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

President Name <b>Joseph Illiano</b> Street Address 1980 Warwick Avenue City Warwick State RI Zip 02889 Secretary Name <b>Joseph Illiano</b> Street Address 1980 Warwick Avenue City Warwick State RI Zip 02889	Vice President Name  Street Address  City State Zip Treasurer Name <b>Joseph Illiano</b> Street Address 1980 Warwick Avenue City Warwick State RI Zip 02889
--	--

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

Director Name <b>Joseph Illiano</b> Street Address 1980 Warwick Avenue City Warwick State RI Zip 02889	Director Name  Street Address  City State Zip
--	---

**10. SHARES AUTHORIZED (\*X\* BOX FOR ATTACHMENT)**

AUTHORIZED SHARES	Class/Series	Par Value
2000		no par

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

ISSUED SHARES	Class/Series	Par Value
100		no par

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

File Date: 9/10/00  
 Check No. 91292000  
 RECEIVED  
 SECRETARY OF STATE  
 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: *Joseph Illiano* Date: 8/29/00  
 Joseph Illiano  
 Print or Type Name of Officer  
 President  
 Title of Officer



**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1997**

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 16060  
2. Name of Corporation Warwick Foods, Inc.  
3. Street Address Principal Business Office 1980 Warwick Avenue  
City Warwick State RI Zip 02889  
4. Business Phone No. 738-4743  
5. State of Incorporation Rhode Island  
6. SIC Code 3079

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

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

President Name Joseph Illiano Street Address 1980 Warwick Avenue City Warwick State RI Zip 02889	Vice President Name  Street Address  City State Zip
Secretary Name Joseph Illiano Street Address 1980 Warwick Avenue City Warwick State RI Zip 02889	Treasurer Name Joseph Illiano Street Address 1980 Warwick Avenue City Warwick State RI Zip 02889

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

Director Name Joseph Illiano Street Address 1980 Warwick Avenue City Warwick State RI Zip 02889	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
	2000		no par

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

ISSUED SHARES	Number of Shares	Class/Series	Par Value
	100		no par

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

File Date: 9/29/02  
Check No.: 0000000000  
By: \_\_\_\_\_  
FOR SECRETARY OF STATE USE ONLY

RECEIVED  
SECRETARY OF STATE  
CORPORATIONS DIV

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: Joseph Illiano Date: 8/29/02  
Print or Type Name of Officer: Joseph Illiano  
Title of Officer: President



**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR** 1996

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 16060 2. Name of Corporation Warwick Foods, Inc.  
3. Street Address Principal Business Office 1980 Warwick Avenue City Warwick State RI Zip 02889  
4. Business Phone No. 738-4743 5. State of Incorporation Rhode Island 6. SIC Code 3079

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

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

President Name <u>Joseph Illiano</u> Street Address <u>1980 Warwick Avenue</u> City <u>Warwick</u> State <u>RI</u> Zip <u>02889</u>	Vice President Name  Street Address  City _____ State _____ Zip _____
Secretary Name <u>Joseph Illiano</u> Street Address <u>1980 Warwick Avenue</u> City <u>Warwick</u> State <u>RI</u> Zip <u>02889</u>	Treasurer Name <u>Joseph Illiano</u> Street Address <u>1980 Warwick Avenue</u> City <u>Warwick</u> State <u>RI</u> Zip <u>02889</u>

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

Director Name <u>Joseph Illiano</u> Street Address <u>1980 Warwick Avenue</u> City <u>Warwick</u> State <u>RI</u> Zip <u>02889</u>	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
	<u>2000</u>		<u>no par</u>

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

ISSUED SHARES	Number of Shares	Class/Series	Par Value
	<u>100</u>		<u>no par</u>

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

File Date: 9/10/00

Check No: 00000000

By: \_\_\_\_\_

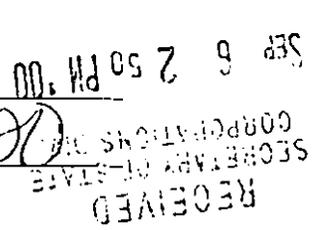
FOR SECRETARY OF STATE USE ONLY

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.

Signature of Officer: Joseph Illiano Date: 8/29/00

Print or Type Name of Officer: Joseph Illiano

President  
Title of Officer





**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1995**  
Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **16060** 2. Name of Corporation **Warwick Foods, Inc.**  
3. Street Address Principal Business Office **1980 Warwick Avenue** City **Warwick** State **RI** Zip **02889**  
4. Business Phone No. **738-4743** 5. State of Incorporation **Rhode Island** 6. SIC Code **3079**

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

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

President Name <b>Joseph Illiano</b> Street Address <b>1980 Warwick Avenue</b> City <b>Warwick</b> State <b>RI</b> Zip <b>02889</b>	Vice President Name  Street Address  City _____ State _____ Zip _____
Secretary Name <b>Joseph Illiano</b> Street Address <b>1980 Warwick Avenue</b> City <b>Warwick</b> State <b>RI</b> Zip <b>02889</b>	Treasurer Name <b>Joseph Illiano</b> Street Address <b>1980 Warwick Avenue</b> City <b>Warwick</b> State <b>RI</b> Zip <b>02889</b>

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

Director Name <b>Joseph Illiano</b> Street Address <b>1980 Warwick Avenue</b> City <b>Warwick</b> State <b>RI</b> Zip <b>02889</b>	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	Class/Series	Par Value
2000		no par

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

ISSUED SHARES	Class/Series	Par Value
100		no par

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

File Date: **9/6/00**  
Check No.: **12890000**  
RECEIVED  
SECRETARY OF STATE  
CORPORATIONS DIVISION

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: **Joseph Illiano** Date: **8/29/00**  
Print or Type Name of Officer: **Joseph Illiano**  
Title of Officer: **President**



**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1994**  
Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 16060  
2. Name of Corporation Warwick Foods, Inc.  
3. Street Address Principal Business Office 1980 Warwick Avenue  
City Warwick State RI Zip 02889  
4. Business Phone No. 738-4743  
5. State of Incorporation Rhode Island  
6. SIC Code 3079  
7. Brief Description of the Character of Business Conducted in Rhode Island  
restaurant

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

President Name Joseph Illiano Street Address 1980 Warwick Avenue City Warwick State RI Zip 02889 Secretary Name Joseph Illiano Street Address 1980 Warwick Avenue City Warwick State RI Zip 02889	Vice President Name  Street Address  City State Zip Treasurer Name Joseph Illiano Street Address 1980 Warwick Avenue City Warwick State RI Zip 02889
--	---

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

Director Name Joseph Illiano Street Address 1980 Warwick Avenue City Warwick State RI Zip 02889	Director Name  Street Address  City State Zip
---	---

**10. SHARES AUTHORIZED (\*X\* BOX FOR ATTACHMENT)**

AUTHORIZED SHARES	Class/Series	Par Value
2000		no par

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

ISSUED SHARES	Class/Series	Par Value
100		no par

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

File Date: 9/16/00  
Check No.: 18900000  
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.

Signature of Officer: \_\_\_\_\_ Date: 8/29/00  
Joseph Illiano  
Print or Type Name of Officer  
President  
Title of Officer



**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR** 1993  
Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 16060 2. Name of Corporation Warwick Foods, Inc.  
3. Street Address Principal Business Office 1980 Warwick Avenue City Warwick State RI Zip 02889  
4. Business Phone No. 738-4743 5. State of Incorporation Rhode Island 6. SIC Code 3079  
7. Brief Description of the Character of Business Conducted in Rhode Island  
restaurant

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

President Name <u>Joseph Illiano</u> Street Address <u>1980 Warwick Avenue</u> City <u>Warwick</u> State <u>RI</u> Zip <u>02889</u>	Vice President Name  Street Address  City _____ State _____ Zip _____
Secretary Name <u>Joseph Illiano</u> Street Address <u>1980 Warwick Avenue</u> City <u>Warwick</u> State <u>RI</u> Zip <u>02889</u>	Treasurer Name <u>Joseph Illiano</u> Street Address <u>1980 Warwick Avenue</u> City <u>Warwick</u> State <u>RI</u> Zip <u>02889</u>

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

Director Name <u>Joseph Illiano</u> Street Address <u>1980 Warwick Avenue</u> City <u>Warwick</u> State <u>RI</u> Zip <u>02889</u>	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	Class/Series	Par Value
<u>2000</u>		<u>no par</u>

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

ISSUED SHARES	Class/Series	Par Value
<u>100</u>		<u>no par</u>

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

File Date 9/16/00 00. 11. 09. 7  
Check No. 418920226  
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.

Signature of Officer Joseph Illiano Date 8/29/00  
Print or Type Name of Officer Joseph Illiano  
Title of Officer President



**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1992**  
Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 16060 2. Name of Corporation Warwick Foods, Inc.  
3. Street Address Principal Business Office 1980 Warwick Avenue City Warwick State RI Zip 02889  
4. Business Phone No. 738-4743 5. State of Incorporation Rhode Island 6. SIC Code 3079  
7. Brief Description of the Character of Business Conducted in Rhode Island  
restaurant

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

President Name <u>Joseph Illiano</u> Street Address <u>1980 Warwick Avenue</u> City <u>Warwick</u> State <u>RI</u> Zip <u>02889</u>	Vice President Name  Street Address  City _____ State _____ Zip _____
Secretary Name <u>Joseph Illiano</u> Street Address <u>1980 Warwick Avenue</u> City <u>Warwick</u> State <u>RI</u> Zip <u>02889</u>	Treasurer Name <u>Joseph Illiano</u> Street Address <u>1980 Warwick Avenue</u> City <u>Warwick</u> State <u>RI</u> Zip <u>02889</u>

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

Director Name <u>Joseph Illiano</u> Street Address <u>1980 Warwick Avenue</u> City <u>Warwick</u> State <u>RI</u> Zip <u>02889</u>	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
	<u>2000</u>		<u>no par</u>

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

ISSUED SHARES	Number of Shares	Class/Series	Par Value
	<u>100</u>		<u>no par</u>

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

File Date: 9/6/00  
Check No.: 9120920000  
By: \_\_\_\_\_  
RECEIVED  
SECRETARY OF STATE  
OFFICE OF THE SECRETARY OF STATE

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: Joseph Illiano Date: 8/29/00  
Print or Type Name of Officer: Joseph Illiano  
Title of Officer: President



**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR** 1991  
Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 16060 2. Name of Corporation Warwick Foods, Inc.  
3. Street Address Principal Business Office 1980 Warwick Avenue City Warwick State RI Zip 02889  
4. Business Phone No. 738-4743 5. State of Incorporation Rhode Island 6. SIC Code 3079  
7. Brief Description of the Character of Business Conducted in Rhode Island  
restaurant

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

President Name <u>Joseph Illiano</u> Street Address <u>1980 Warwick Avenue</u> City <u>Warwick</u> State <u>RI</u> Zip <u>02889</u>	Vice President Name  Street Address  City _____ State _____ Zip _____
Secretary Name <u>Joseph Illiano</u> Street Address <u>1980 Warwick Avenue</u> City <u>Warwick</u> State <u>RI</u> Zip <u>02889</u>	Treasurer Name <u>Joseph Illiano</u> Street Address <u>1980 Warwick Avenue</u> City <u>Warwick</u> State <u>RI</u> Zip <u>02889</u>

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

Director Name <u>Joseph Illiano</u> Street Address <u>1980 Warwick Avenue</u> City <u>Warwick</u> State <u>RI</u> Zip <u>02889</u>	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	Class/Series	Par Value
<u>2000</u>		<u>no par</u>

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

ISSUED SHARES	Class/Series	Par Value
<u>100</u>		<u>no par</u>

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

File Date 9/6/00  
Check No. 00000000  
By \_\_\_\_\_  
FOR SECRETARY OF STATE USE ONLY

RECEIVED  
SECRETARY OF STATE  
SEP 8 2 50 PM '00

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.

Joseph Illiano 8/29/00  
Signature of Officer Date  
Print or Type Name of Officer  
President  
Title of Officer



**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR** 1990  
Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 16060 2. Name of Corporation Warwick Foods, Inc.  
3. Street Address Principal Business Office 1980 Warwick Avenue City Warwick State RI Zip 02889  
4. Business Phone No. 738-4743 5. State of Incorporation Rhode Island 6. SIC Code 3079  
7. Brief Description of the Character of Business Conducted in Rhode Island  
restaurant

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

President Name <u>Joseph Illiano</u> Street Address <u>1980 Warwick Avenue</u> City <u>Warwick</u> State <u>RI</u> Zip <u>02889</u> Secretary Name <u>Joseph Illiano</u> Street Address <u>1980 Warwick Avenue</u> City <u>Warwick</u> State <u>RI</u> Zip <u>02889</u>	Vice President Name  Street Address  City _____ State _____ Zip _____ Treasurer Name <u>Joseph Illiano</u> Street Address <u>1980 Warwick Avenue</u> City <u>Warwick</u> State <u>RI</u> Zip <u>02889</u>
--	--

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

Director Name <u>Joseph Illiano</u> Street Address <u>1980 Warwick Avenue</u> City <u>Warwick</u> State <u>RI</u> Zip <u>02889</u>	Director Name  Street Address  City _____ State _____ Zip _____
--	---

**10. SHARES AUTHORIZED (\*X\* BOX FOR ATTACHMENT)**

AUTHORIZED SHARES	Number of Shares	Class/Series	Par Value
	<u>2000</u>		<u>no par</u>

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

ISSUED SHARES	Number of Shares	Class/Series	Par Value
	<u>100</u>		<u>no par</u>

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

File Date: 9/6/00  
Check No: 91209250000  
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.  
Signature of Officer: Joseph Illiano Date: 8/29/00  
Print or Type Name of Officer: Joseph Illiano  
Title of Officer: President



**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1989**  
Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 16060  
2. Name of Corporation Warwick Foods, Inc.  
3. Street Address Principal Business Office 1980 Warwick Avenue  
City Warwick State RI Zip 02889  
4. Business Phone No 738-4742  
5. State of Incorporation Rhode Island  
6. SIC Code 3079

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

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

President Name Joseph Illiano Street Address 1980 Warwick Avenue City Warwick State RI Zip 02889	Vice President Name  Street Address  City State Zip
Secretary Name Joseph Illiano Street Address 1980 Warwick Avenue City Warwick State RI Zip 02889	Treasurer Name Joseph Illiano Street Address 1980 Warwick Avenue City Warwick State RI Zip 02889

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

Director Name Joseph Illiano Street Address 1980 Warwick Avenue City Warwick State RI Zip 02889	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	Class/Series	Par Value
2000		no par

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

ISSUED SHARES	Class/Series	Par Value
100		no par

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

File Date: 9/16/00  
Check No.: 1209 2000  
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 hereon are true and correct.

Signature of Officer: Joseph Illiano Date: 8/29/00  
Print or Type Name of Officer: Joseph Illiano  
President  
Title of Officer



**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR** 1988  
Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 16060 2. Name of Corporation Warwick Foods, Inc.  
3. Street Address Principal Business Office 1980 Warwick Avenue City Warwick State RI Zip 02889  
4. Business Phone No. 738-4743 5. State of Incorporation Rhode Island 6. SIC Code 3079  
7. Brief Description of the Character of Business Conducted in Rhode Island  
restaurant

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

President Name <u>Joseph Illiano</u> Street Address <u>1980 Warwick Avenue</u> City <u>Warwick</u> State <u>RI</u> Zip <u>02889</u>	Vice President Name  Street Address  City _____ State _____ Zip _____
Secretary Name <u>Joseph Illiano</u> Street Address <u>1980 Warwick Avenue</u> City <u>Warwick</u> State <u>RI</u> Zip <u>02889</u>	Treasurer Name <u>Joseph Illiano</u> Street Address <u>1980 Warwick Avenue</u> City <u>Warwick</u> State <u>RI</u> Zip <u>02889</u>

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

Director Name <u>Joseph Illiano</u> Street Address <u>1980 Warwick Avenue</u> City <u>Warwick</u> State <u>RI</u> Zip <u>02889</u>	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	Class/Series	Par Value
<u>2000</u>		<u>no par</u>

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

ISSUED SHARES	Class/Series	Par Value
<u>100</u>		<u>no par</u>

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

File Date: 9/16/00  
Check No: 91839 250000  
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.  
Signature of Officer: Joseph Illiano Date: 8/29/00  
Print or Type Name of Officer: Joseph Illiano  
Title of Officer: President



**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1987**  
Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 16060 2. Name of Corporation Warwick Foods, Inc.  
3. Street Address Principal Business Office 1980 Warwick Avenue City Warwick State RI Zip 02889  
4. Business Phone No. 738-4743 5. State of Incorporation Rhode Island 6. SIC Code 3079

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

restaurant

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

President Name Joseph Illiano Street Address 1980 Warwick Avenue City Warwick State RI Zip 02889	Vice President Name  Street Address  City State Zip
Secretary Name Joseph Illiano Street Address 1980 Warwick Avenue City Warwick State RI Zip 02889	Treasurer Name Joseph Illiano Street Address 1980 Warwick Avenue City Warwick State RI Zip 02889

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

Director Name Joseph Illiano Street Address 1980 Warwick Avenue City Warwick State RI Zip 02889	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	Class/Series	Par Value
2000		no par

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

ISSUED SHARES	Class/Series	Par Value
100		no par

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.

File Date: 9/16/00  
Check No: 9189250200  
By: \_\_\_\_\_  
FOR SECRETARY OF STATE USE ONLY

Signature of Officer: Joseph Illiano Date: 8/29/00  
Print or Type Name of Officer: President  
Title of Officer: \_\_\_\_\_

RECEIVED  
SECRETARY OF STATE  
CORPORATIONS DIV

Filing fee: \$15.00

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

*lu*

State of Rhode Island and Providence Plantations  
OFFICE OF THE SECRETARY OF STATE  
CORPORATE I.D. #16060

Annual Report for the year 1986

FIRST: The name of the corporation is WARWICK FOODS, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is sale of food

FOURTH: If foreign corporation, address of its principal office  
Not applicable

FIFTH: Business address in Rhode Island (blank reports will be mailed to this address)  
911 Turks Head Building, Providence, RI 02903

SIXTH: Names and addresses of its directors and officers:

(Addresses must include street and number, if any)

Name	Office	Address
Guiseppe Illiano	Director	One Meadowbrook Rd., N. Providence, RI
	Director	
	Director	
Guiseppe Illiano	President	same as above
	Vice President	
Guiseppe Illiano	Secretary	same as above
Guiseppe Illiano	Treasurer	same as above

(If additional space is needed, attach rider)

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
1,000	common		no par value

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
90	common		no par value

Dated: 9/20 19 86

10-3-86

10/03/86  
080244  
PAINT

WARWICK FOODS, INC.  
(Name of Corporation)  
By *Guiseppe Illiano*  
Title President

Corporate ID #16060

(Report must be signed by an officer)

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

ANRE 15-00  
CHER 15-00  
080244

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.....16060.....

Annual Report for the year .....1985.....

FIRST: The name of the corporation is.....WARWICK FOODS, INC.....

SECOND: It is incorporated under the laws of.....Rhode Island.....

THIRD: Character of business, briefly stated, is.....sale of food.....

FOURTH: If foreign corporation, address of its principal office.....  
not applicable.....

FIFTH: Business address in Rhode Island.....911 Turks Head Building  
Providence, RI 02903.....

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

Name	Office	Address (including number, street, zip code)
Guisepe Illiano	Director	One Meadowbrook Road, N. Providence, RI
	Director	
	Director	
Guisepe Illiano	President	same as above
	Vice President	
Guisepe Illiano	Secretary	same as above
Guisepe Illiano	Treasurer	same as above

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
1,000	common		no par value

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
90	common		no par value

Dated May 6 1985

WARWICK FOODS, INC.  
(Name of Corporation)

By Guisepe Illiano  
Title President

(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  
OFFICE OF THE SECRETARY OF STATE

Annual Report for the year 1982

FIRST: The name of the corporation is  
WARWICK FOODS, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is sale of food.

FOURTH: If foreign corporation, address of its principal office  
Not applicable.

FIFTH: Business address in Rhode Island (blank reports will be mailed to this  
address) 911 Turks Head Building, Providence, Rhode Island 02903

SIXTH: Names and addresses of its directors and officers:

(Addresses must include street and number, if any)

Name	Office	Address
Guiseppe Illiano	Director	1 Meadowbrook Av., North Providence, R
	Director	
	Director	
Guiseppe Illiano	President	as above
	Vice President	
Guiseppe Illiano	Secretary	as above
Guiseppe Illiano	Treasurer	as above

(If additional space is needed, attach rider)

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
1,000	common		no par value

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
90	common	12 20 82	no par value

Dated: December 2, 1982 WARWICK FOODS, INC.

(Name of Corporation)  
By: *[Signature]*  
Title: President  
(Report must be signed by an officer)

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

DEC 20 1982 *[Signature]*

