



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. 127354 | | 2. Name of Corporation SCHWABBY'S WINE AND SPIRITS, INC. | | |
| 3. Street Address Principal Business Office 855 POINT JUDITH ROAD | | City NARRAGANSETT | State RHODE ISLAND | Zip 02882 |
| 4. Business Phone No. 401-789-3719 | | 5. State of Incorporation RHODE ISLAND | | 6. SIC Code 7880 |
| 7. Brief Description of the Character of Business Conducted in Rhode Island LIQUOR STORE | | | | |

| | | | | | |
|--|-------------|--|----------------------|-------------|--------------|
| 8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS | | | | | |
| President Name Stephen E. Schwab | | Vice President Name Susan T. Schwab | | | |
| Street Address 47 Saybrook Avenue | | Street Address 47 Saybrook Avenue | | | |
| City Narragansett | State RI | Zip 02882 | City Narragansett | State RI | Zip 02882 |
| Secretary Name Stephen E. Schwab | | Treasurer Name Stephen E. Schwab | | | |
| Street Address 47 Saybrook Avenue | | Street Address 47 Saybrook Avenue | | | |
| City Narragansett | State RI | Zip 02882 | City Narragansett | State RI | Zip 02882 |

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|---|-------------|----------------|------|-------|-----|
| 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS | | | | | |
| Director Name Stephen E. Schwab | | Director Name | | | |
| Street Address 47 Saybrook Avenue | | Street Address | | | |
| City Narragansett | State RI | Zip 02882 | 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 |
| 600 | 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



File Date 3/24/05
 Check No. 4329
 By: N.
 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.

Stephen E. Schwab 1-15-05
 Signature of Officer Date
Stephen E. Schwab
 Print or Type Name of Officer
President / Secretary / Treasurer
 Title of Officer



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| Director Name . | | | Director Name . | | |
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| 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> | | | | | |

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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.

Stephen E. Schwab 1-14-04
Signature of Officer Date
Stephen E. Schwab
Print of Type Name of Officer
Secretary
Title of Officer

| | |
|---------------------------------|-------------|
| FILED | |
| File Date | APR 29 2004 |
| Check No. | By A-29401 |
| By | |
| FOR SECRETARY OF STATE USE ONLY | |



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| Director Name | | Director Name | | | |
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| Number of Shares | Class/Series | Par Value | Number of Shares | Class/Series | Par Value |
| 600 | NO PAR VALUE | | 100 | | No Par |
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APR 04 2003

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.

Stephen Schwab 2-7-03
Signature of Officer Date
Stephen Schwab
Print or Type Name of Officer
Pres.
Title of Officer

127354 DBC1/27/031:49:53 PM

File Date _____

Check No. _____

By: _____

FOR SECRETARY OF STATE USE ONLY