



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 IN BLACK)

1. Corporate ID No 129160		2. Name of Corporation Lobster.com/Interactive, Inc.	
3. Street Address Principal Business Office 150 CHESTNUT STREET 3RD FLOOR		City PROVIDENCE	State RI
4. Business Phone No. 4012733400		5. State of Incorporation RHODE ISLAND	
		6. SIC Code	

7. Brief Description of the Character of Business Conducted in Rhode Island
TO PURCHASE, MARKET, DISTRIBUTE AND SELL SEAFOOD AND SEAFOOD-RELATED PRODUCTS, INCLUDING BUT NOT LIMITED TO LOBSTER AND OTHER SHELLFISH AT WHOLESALE AND RETAIL.

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

President Name Andrew Rock			Vice President Name		
Street Address 150 Chestnut Street - 3rd Floor			Street Address		
City Providence	State RI	Zip 02903	City	State	Zip
Secretary Name Andrew Rock			Treasurer Name Andrew Rock		
Street Address 150 Chestnut Street - 3rd Floor			Street Address 150 Chestnut Street - 3rd Floor		
City Providence	State RI	Zip 02903	City Providence	State RI	Zip 02903

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

Director Name Andrew Rock			Director Name		
Street Address 150 Chestnut Street - 3rd Floor			Street Address		
City Providence	State RI	Zip 02903	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip

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

AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
4,000 COMM NO PAR VALUE			100	Comon	No Par Value

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



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File Date 2/15/05

Check No. 200

By: W.

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.

Andrew Rock Feb 4, 2005
Signature of Officer Date

Andrew Rock

Print or Type Name of Officer

President

Title of Officer

Form 630 12/01



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3. Street Address Principal Business Office 150 Chestnut Street - 3rd Floor		City Providence	State RI
4. Business Phone No. 401-273-3400		5. State of Incorporation RHODE ISLAND	6. SIC Code

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

File Date JUL 07 2004

Check No. By [Signature]

By: [Signature]

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 August 2, 2004

Andrew Rock

Print or Type Name of Officer

President

Title of Officer