

100 North Main Street

Corporations Division

Matthew A. Brown, Secretary of State

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

FILED

MAR 0 1 2005

FOR SECRETARY OF STATE USE ONLY

File Date

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR _

Providence, RI 02903-1335 401.222.3040

2005

Corporate ID No.	OR PRINTED IN BIACK) 2. Name of Corps				
95763	Michael's				
1. Street Address Principal Business Office 2368 MENDIN RD,			CunB	State RI	Zip 02864
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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 BIACK)

1. Corporate ID No.	2. Name of Corporation		_	·	
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3 Street Address Principal Business C)[Лсе			State	Zip
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4. Business Phone No.		5. State of Incorporation			G. SIC Code
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7. Brief Description of the Character	of Business Conducted in R	bode Island	•		
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Secretary Name			Treasurer Name		
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9. NAMES AND ADDRESSES	OF THE DIRECTOR	S: ("X" BOX FOR ATT	ACHMENT) FILL IN SI	ACES BEFORE USING	ATTACHMENTS
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FOR SECRETARY OF ST	ALE USE ONLY	_	Title of Officer	•	



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 _ 2003

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

(FORM MUST BE TYPED OR PRI	VTED IN BLACK)				_
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3. Street Address Principal Business	Office			State	Zip
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4. Business Phone No.		5. State of Incorporation	on		6. SIC Code
7. Brief Description of the Character	1717	RH	ODC ICLLUT	>	
7. Brief Description of the Character	of Business Conducted in	Khode Island			
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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 2002

Filing Period: January 1 · March 1 · Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINT	TED IN BIACK)			•	
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4 Business Phone No.		5. State of Incorporation	Islano	_	6. SIC Code
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L.—		I	Title of Officer		



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 2001

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

(FORM MUST BE TYPED OR PRINT	TED IN BIACK)	_			
1. Corporate ID No.	2. Name of Corporation	us nu	5 Inc		
3 Street Address Principal Business O	fice		City	State	Zφ
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4. Business Phone No.		5. State of Incorporation			6. SIC Code
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7. Brief Description of the Character of	Business Conducted in R	bode Island			
8. NAMES AND ADDRESSES	CA COLO	CERLLY ("X" BOX FOR ATTAC	CHMENT) FILL IN SPACE	く Oテム (CES BEFORE USING	ATTACHMENTS
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9. NAMES AND ADDRESSES	OF THE DIRECTOR	S: ("X" BOX FOR ATT	ACHMENT) FILL IN SP	ACES BEFORE USIN	G ATTACHMENTS
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Director Name	_		Director Name		
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			Title of Officer		



Matthew A. Brown, Secretary of State

Corporations Division 100 North Main Street Providence, RI 02903-1335 401-222-3040

PROFIT CORPORATION	ON	ANNUAL REPORT FOR THE YEAR		444
Filing Period: January 1 - March 1	•	Filing Fee: \$50.00	_,	

(FORM MUST BE TYPED OR PRINTED IN BIACK) 1. Corporate ID No. 2 Name of Corporation 02864 6. SIC Code 5. State of Incorporation 7. Brief Description of the Character of Business Conducted in Rhode Island 8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) | FILL IN SPACES BEFORE USING ATTACHMENTS Vice President Name Street Address ZIp Street Address Street Address City State City 9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Director Name Director Name 702C Street Address Street Address City City Zφ Director Name Director Name None None Street Address Street Address City State Z.ip City State Z I p10. 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 Par Value Class/Series This report must be signed in ink by atthurtha 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 MON contained herein are true and correct. File Date Signature of Officer ₿1∀18 ∃0 4676380∃\$ BECEIVED FOR SECRETARY OF STATE USE ONLY



Matthew A. Brown, Secretary of State

Corporations Division 100 North Main Street Providence, RI 02903-1335 401.222.3040

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

(FORM MUST BE TYPED OR PRIM	TED IN BIACK)				
1. Corporate ID No	2. Name of Corporation				-
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3 Street Address Principal Business O	Tice		COMBRE	State	21002864
5368 Da	DUN RD	<u> </u>	CUMBERL	LA RZ	
4. Business Phone No.		5 State of Incorporation	ISLAD		6. SIC Code
7. Belof Description of the Character of	f Business Conducted in	Rhode Island			<i></i>
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8. NAMES AND ADDRESSES	OF THE OFFICERS	: ("X" BOX FOR AT	TACHMENT) [FILL I	N SPACES BEFORE USIN	NG ATTACHMENTS
President Name	_		Vice President Name	_	
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Secretary Name	1	1 0000	Treasurer Name		
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Street Address	, —		Street Address		
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9. NAMES AND ADDRESSES	OF THE DIRECTO	RS: ("X" BOX FOR	TTACHMENT) [FILE	IN SPACES BEFORE US	ING ATTACHMENTS
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James R. Langevin, Secretary of State
Corporations Division
100 North Main Street-Providence, RI 02903-1335 401-277-3040

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. 95763	2. Name of Corpor Michael's	Meats, Inc.		ϕ^{N}			
3. Street Address Principal Busin			City	State O.	Zip C//		
1368 ME	NDON RD.		CUMBERLAN	D State R.I	02864		
4. pusiness rnone No.		S. State of Incorporation RHODE ISLAN			6. SIC Code		
HU 658 - [] 7. Brief Description of the Chara	cter of Business Conducted	in Rhode Island		·			
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File Date:	M25/98	
Check No.:	9953	
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.