



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. 107968		2. Name of Corporation SHOP "N" GO, INC.			
3. Street Address Principal Business Office 1567 Plainfield Pike			City Johnston	State RI	Zip 02919
4. Business Phone No. (401) 464 4292		5. State of Incorporation RHODE ISLAND			6. SIC Code 0
7. Brief Description of the Character of Business Conducted in Rhode Island TO OPERATE CONVENIENCE STORES.					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Munawar H. Ghuman			Vice President Name Shahzad Yaqoob		
Street Address 239 Stoney Acre Drive			Street Address 39 Union Avenue		
City Cranston	State RI	Zip 02920	City Johnston	State RI	Zip 02919
Secretary Name Shahzad Yaqoob			Treasurer Name Munawar H. Ghuman		
Street Address same			Street Address same		
City same	State same	Zip same	City same	State same	Zip same
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Shahzad Yaqoob			Director Name Munawar H. Ghuman		
Street Address same			Street Address same		
City same	State same	Zip same	City same	State same	Zip same
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	\$1.00 PAR VALUE		100	sec. 1244 stock	1.00

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



File Date	1-31-05
Check No.	2822
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.

1-27-05
Signature of Officer Date
Munawar H. Ghuman
Print or Type Name of Officer
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 OR PRINTED IN BLACK)

1. Corporate ID No. 107968		2. Name of Corporation SHOP "N" GO, INC.			
3. Street Address Principal Business Office 1567 Plainfield Pike			City Johnston	State RI	Zip 02919
4. Business Phone No. (401) 464 4292		5. State of Incorporation RHODE ISLAND			6. SIC Code 0
7. Brief Description of the Character of Business Conducted in Rhode Island TO OPERATE CONVENIENCE STORES.					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Munawar H. Ghuman			Vice President Name Shahzad Yaqoob		
Street Address 239 Stoney Acre Drive			Street Address 39 Union Avenue		
City Cranston	State RI	Zip 02920	City Johnston	State RI	Zip 02910
Secretary Name Shahzad Yaqoob			Treasurer Name Munawar H. Ghuman		
Street Address same			Street Address same		
City same	State same	Zip same	City same	State same	Zip same
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Shahzad Yaqoob			Director Name Munawar H. Ghuman		
Street Address same			Street Address same		
City same	State same	Zip same	City same	State same	Zip same
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			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
600	\$1.00 PAR VALUE		100	sec. 1244 stock	1.00

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



* 1 0 7 9 6 8 *

File Date 2/20/04
Check No. 2508
By: 18

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.

Munawar Ghuman 1/21/04
Signature of Officer Date

Print or Type Name of Officer

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 OR PRINTED IN BLACK)

1. Corporate ID No.

107968

2. Name of Corporation

SHOP "N" GO, INC.

3. Street Address Principal Business Office

1567 Plainfield Pike

City

Johnston

State

RI

Zip

02919

4. Business Phone No.

(401) 942 1300

5. State of Incorporation

RHODE ISLAND

6. SIC Code

0

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

to operate convenience stores and any other lawful business

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

President Name

Shahzad Yaqoob

Vice President Name

Munawar H. Chumman

Street Address

39 Union Avenue

Street Address

239 Stoney Acre Drive

City

Johnston

State

RI

Zip

02919

City

Cranston

State

RI

Zip

02920

Secretary Name

Munawar H. Chumman

Treasurer Name

Shahzad Yaqoob

Street Address

239 Stoney Acre Drive

Street Address

39 Union Avenue

City

Cranston

State

RI

Zip

02920

City

Johnston

State

RI

Zip

02919

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

Director Name

Shahzad Yaqoob

Director Name

Munawar H. Chumman

Street Address

39 Union Avenue

Street Address

239 Stoney Acre Drive

City

Johnston

State

RI

Zip

02919

City

Cranston

State

RI

Zip

02920

Director Name

Street Address

City

State

Zip

Street Address

City

State

Zip

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

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

600 \$1.00 PAR VALUE

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

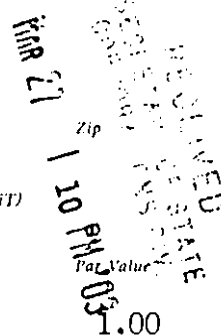
ISSUED SHARES

Number of Shares

Class/Series

Par Value

100



* 1 0 7 9 6 8 *

File Date. **FILED**

Check No. **MAR 27 2003**

By **By GMA315914**

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 **Shahzad Yaqoob** Date **3/13/03**

Print or Type Name of Officer **Shahzad Yaqoob**

Title of Officer **President**



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
401-222-4040



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. 2. Name of Corporation

107968

SHOP "N" GO, INC.

3. Street Address Principal Business Office

1569 PLAINFIELD PIKE

City

JOHNSTON

State

RI

Zip

02919

4. Business Phone No.

401-464-4292

5. State of Incorporation

RHODE ISLAND

6. SIC Code

0

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

Convinient Store

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

President Name

MUNAWAR H. GHUMMAN

Vice President Name

SHAHZAD YAQOOB

Street Address

239 STONEY ACRE DRIVE

Street Address

39 UNION AVE.

City State Zip

CRANSTON

RI

02920

City State Zip

Johnston

RI

02919

Secretary Name

Munawar H. Ghumman

Treasurer Name

Shahzad Yaqoob

Street Address

239 Stoney Acre Drive

Street Address

39 Union Avenue

City State Zip

Cranston

RI

02920

City State Zip

Johnston

RI

02919

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

Director Name

Munawar H. Ghumman

Director Name

Shahzad Yaqoob

Street Address

239 Stoney Acre Drive

Street Address

39 Union Ave.

City State Zip

Cranston

RI

02920

City State Zip

Johnston

RI

02919

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

600 \$1.00 PAR VALUE

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

ISSUED SHARES

Number of Shares Class/Series Par Value

100

common

1.00

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



* 1 0 7 9 6 8 *

File Date: 2-22-02

Check No: 6358

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

SHAHZAD VIQOOB

Print or Type Name of Officer

VICE PRESIDENT

Title of Officer

5

Date

Form 640 12/01



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. **107968**
2. Name of Corporation **SHOP "N" GO, INC.**
3. Street Address Principal Business Office
1569 PLAINFIELD PIKE
4. Business Phone No. **401 464-4292**
5. State of Incorporation **RHODE ISLAND**
7. Brief Description of the Character of Business Conducted in Rhode Island

City **Johnston** State **R.I.** Zip **02919**
6. SIC Code **0**

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

President Name **SHAHZAD YAGOOB**
Street Address **39 Union Ave**
City **Johnston** State **R.I.** Zip **02919**

Vice President Name **MUAWAZ H. GHUMMAN**
Street Address **239 Stony Acre Dr.**
City **Cranston** State **R.I.** Zip **02920**

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

Treasurer Name
Street Address **N/A**
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

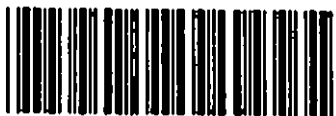
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES	Number of Shares	Class/Series	Par Value
	600	\$1.00	PAR VALUE

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

ISSUED SHARES	Number of Shares	Class/Series	Par Value

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



* 1 0 7 9 6 8 *

File Date: 2/15

Check No.: 3202

By: de

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 M. Ghumman Date 2/12/01

Print or Type Name of Officer MUAWAZ H. GHUMMAN

Title of Officer V.P.



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 2000

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.

107968

2. Name of Corporation

SHOP "N" GO, INC.

3. Street Address Principal Business Office

1569 Plainfield Pike

City

Johnston

State

RI

Zip

02919

4. Business Phone No.

401-464-4292

5. State of Incorporation

RHODE ISLAND

6. SIC Code

3210

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

CONVENIENT STORES

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

FILL IN SPACES BEFORE USING ATTACHMENTS

President Name

Munawar H. Ghuman

Street Address

239 Stoney Acre Drive

City

State

Zip

Cranston

RI

02920

Secretary Name

Munawar H. Ghuman

Street Address

Same as above

City

State

Zip

Vice President Name

Shahzad Yaqoob

Street Address

39 Union Avenue

City

State

Zip

Johnston

RI

02919

Treasurer Name

Shahzad Yaqoob

Street Address

Same as above

City

State

Zip

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

FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

Munawar Ghuman

Street Address

Same as above

City

State

Zip

Director Name

Shahzad Yaqoob

Street Address

Same as above

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

600 \$1.00 PAR VALUE

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

ISSUED SHARES

Number of Shares

Class/Series

Par Value

100

common

1.00

~~NO PAR~~

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



* 1 0 7 9 6 8 *

File Date

2/10/00

Check No.

1128

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

President

Print or Type Name of Officer

Munawar H. Ghuman

Title of Officer