

# 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

### LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR \_

2005

1. ID No. <b>91977</b>	· · · · · · · · · · · · · · · · · · ·	Exact name of the limited liability company  VARWICK TACO, LLC			
3. State of Formation RHODE ISLAND  4 Brief description of the character of the bits FAST FOOD RESTAURANT			iness which is actually conducted in I	bode Island	·
5. Principal office ad	ldress		City	State	Zip
45 Walpole	St., Suite 6		Norwood	MA	02062
5. MAILING ADI	DRESS OF LIMITED LIABI	LITY COMPANY AND	NAME OR TITLE OF CONTA	CT PERSON:	
SveDol	rertu		Contact Title Controller		
Street Address			City	State	Zip
45 Walpole	St., Suite 6		Norwood	MA	02062
Manager Name	FILL IN SE	ACES BEFORE USING	D LIABILITY COMPANY, IF A ATTACHMENTS ("X" BOX RES FILING OF AMENDMENT  Alanager Name	FOR ATTACHMENT)	] 2) / 7-16-52
Street Address			Street Address		
	State	Zip	Street Address  City	State	Zip
City	State	Zip		State	Zip
Street Address  City  Manager Name  Street Address	State	Zip	City	State	Zip
City Manager Name Sinvi Address	State	Zip Zip	City Manager Name	State State	Zip Zip
City  Manager Name  Street Address  City  8. RESIDENT AC	State GENT IN RHODE ISLAND	Ζιφ	City  Manager Name  Street Address	State	Zip
City  Manager Name  Street Address  City  B. RESIDENT Address	State GENT IN RHODE ISLAND	Ζιφ	City  Manager Name  Street Address  City  nanges require filing of For	State rm 642 - R.1.G.L. 7-16-1	Zip

This report must be signed in ink by an authorized person pursuant to R.I.G.L. 7-16-66.

File Date	10/24/05 -91977
Check No.  By:	CXC
	FOR SECRETARY OF STATE USE ONLY

ncluding any ac	perjury, I declare and affirm that companying schedules and states	
	are true and correct.	
le.	1 Tolamo	9/13/05

Signature of Authorized Person

Date

Print or Type Name of Authorized Person



# 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, Rl 02993-1335 401-222-3040

### 41TED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2004

I-ID No	2 Protest name of the	с конней навыну сэпрану				
91977_	WARWICK TAC	RWICK TACO, LLC				
3. State of Formation	r 4. Brief de	scription of the character of the b	usines which is actually conducted in Rh	ode Island		
RHODE ISLAN	D FAST F	OOD RESTAURANT				
Frincipal give at 45 Walpo	ole Street,	Suite 6	Norwood	State MA	<sup>Ζιρ</sup> 02062	
6. MAILING AD	DRESS OF LIMITED	LIABILITY COMPANY ANI	D NAME OR TITLE OF CONTAC	T PERSON:	•	
outact Name	c \_1	-t	Contact Infe			
<del>Linda Wa</del>	HSt Sue 101	rerty	Controller			
treet Address			City	State	Zψ	
45 Walpo	le Street, :	Suite 6	Norwood	MA	02062	
. NAME AND A	DDRESS OF EACH M	IANAGER OF THE LIMITE	ED LIABILITY COMPANY, IF AP	PLICABLE		
		IN SPACES BEFORE USIN		FOR ATTACHMENT) $\square$		
	ANY MODIFICATION	NS TO MANAGERS REQUI	IRES FILING OF AMENDMENT,	R.I.G.L. 7-16-12 (a) (2	3) / 7-16-52	
favager Valle			Montger Nanc.			
treet Address		•	Street Address			
		i	City	State	Zip	
Tuy .	State	Ziþ	City		15:45	
•	State	Z.tp	Çiji -		2.42	
•	State	Zψ	Manager Name			
lanager Name	State	<u>Ζ</u> φ	Manager Name			
danager Name	State	Zψ				
lanager Name treet Address	State State		Manager Name Street Address			
danager Name itreet Address		Zφ	Manager Name	State	Zip	
danager Name treet Address My	State	Zip	Manager Name Street Address	State	Zip	
danager Name treet Address M;	State	Zip	Manager Name  Street Address  City	State	Zip	
lanager Name treet Address My  ARESIDENT AG	State  GENT IN RHODE ISL	Zip	Manager Name  Mreet Address  City  Changes require filling of Form	State	Zip	
danager Name itreet Address http:  A. RESIDENT ACTOR Name GEORGE M. CAP	State  GENT IN RHODE ISL	Zip	Manager Name  Mreet Address  City  Changes require filling of Form	State	Zqp	
Ony Manager Name Street Address One B. RESIDENT Address GEORGE M. CAP Address 942 PARK AVENI	State  GENT IN RHODE ISL.	Zip	Manager Name  Manager Name  Address  Cuty  Changes require filing of Form  Address		Zip	

This report must be signed in ink by an authorized person pursuant to R.I.G.L. 7-16-66.



Check No. 026250

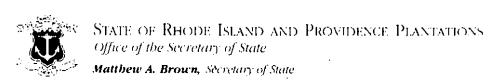
By \_\_\_\_\_ FOR SECRETARY OF STATE USE ONLY

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 perein are true and correct.

Signature of Audhorized Person

10/5/04

Print of Appe Name of Authorized Person



Filing Period: September 1 - November 1 • Filing Fee: \$50.00

Corporations Division 100 North Main Street Providence, Rl 02903-1335

401 222 3640

### LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR \_

2003

(FORM MUST BE TYPED O	OR PRINTED IN BLACK)				
1 ID 80	2 Ixact name of the limite	d hability company			
91977	WARWICK TACO, LLC				
3 State of Formation	4. Brief description	m of the character of the b	nisiness which is actually conducted in RL	ode Island	
RHODE ISLAND	FAST FOOD	RESTAURANT			
5 Frincipal office address			City	State	Zφ
45 Walpole S	Street, Suite	e 6	Norwood	MA	02062
6. MAILING ADDRES	S OF LIMITED LIABI	LITY COMPANY AN	D NAME OR TITLE OF CONTAC	T PERSON:	•
Sue Doherty			Contact File Controller		
Street Address			On .	State	Z.(p)
45 Walpole S	Street, Suite	e 6	Norwood	MA	02062
7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED FILL IN SPACES BEFORE USING A ANY MODIFICATIONS TO MANAGERS REQUIRE  Manager Name			G ATTACHMENTS ("X" BOX	FOR ATTACHMENT) [	<del></del>
Street Address	· ·		Street Address		
C#1	State	Zip	Gd <sub>l</sub> :	State	Zф
Manager Name			Manager Name	·····	J
Street Address	<del>.</del>		Street Address		
$Gd\gamma$	State	Zφ	Cuy	State	Zφ
8. RESIDENT AGENT Agent Name GEORGE M. CAPPELLO		DO NOT ALTER - (	Changes require filing of Form Address	n 642 - R.I.G.L. 7-16-1	11
942 PARK AVENUE			CRANSTON		υρ <b>02910</b>

This report must be signed in ink by an authorized person pursuant to R.I.G.L. 7-16-66.

	* 9 1 9 7 7 *
File Date	RECEIVED
Check No	DFC 29 2003 By 1/10 023022
ByFOI	R SECRETARY OF STATE USE ONLY

Inder penalty of perjury, I declare and affirm t neluding any accompanying schedules and sta	•
ontained herein are true and correct	
Rose Lotump	10/6/03



Edward S. Inman, 111, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401.222.3040

### LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR \_2002

Filing Period: September 1 - November 1 • Filing Fee: \$50.00

xact name of the lim	ited lighilty company			
1D No. 2. Exact name of the limited liability company 91977 WARWICK TACO. LLC				
ARWICK TACO, LI			<u></u>	
1 '		ne business which is actually conducte	d in Rhode Island	
FAST FOOD	RESTAURANT			
•		City	State	Zip
Street, S	uite 6	Norwood	MA	02062
OF LIMITED	LIABILITY COMP	ANY AND NAME OR TITLE	OF CONTACT PERSO	N:
		Contact Title		
у		<ul> <li>Contr</li> </ul>	oller	
<del>4.</del>		City	State	Zip
Street, S	uite 6	<ul> <li>Norwood</li> </ul>	MA	02062
FILL_IN SP	ACES BEFORE USIN	G ATTACHMENTS ("X" BOX UIRES FILING OF AMENDMENT.	X FOR ATTACHMENT	16-52
		•Manager Name •		
		* Street Address		
State	Zip	*City	State	Zip
<b>.</b>		Manager Name		
·· · · ·	<del></del>	Sircei Address		
State	Zip	City	State	Zip
N RHODE ISLAN	l D -DO NOT ALTER- C	hanges require filing of I	orm 642 - R.I.G.L. 7-16-	
····································		Address		
	. <u>.                                   </u>			
		City	Zip	
		CRANSTON	02	1910
	Street, Since State  State  State  State  State	A Brief description of the character of the FAST FOOD RESTAURANT  Street, Suite 6 S OF LIMITED LIABILITY COMP  STREET, Suite 6 SS OF EACH MANAGER OF THE L FILL IN SPACES BEFORE USIN Y MODIFICATIONS TO MANAGERS REQ  State Zip	4. Brief description of the character of the business which is actually conducted FAST FOOD RESTAURANT  Street, Suite 6  SOF LIMITED LIABILITY COMPANY AND NAME OR TITLE Contact Title  Y  Street, Suite 6  Norwood  SOF EACH MANAGER OF THE LIMITED LIABILITY COMPANY AND NAME OR TITLE Contact Title  Y  Street, Suite 6  Norwood  SOF EACH MANAGER OF THE LIMITED LIABILITY COMPANY AND NAME OR TITLE CONTACT CITY  FILL IN SPACES BEFORE USING ATTACHMENTS ("X" BO)  Y MODIFICATIONS TO MANAGERS REQUIRES FILING OF AMENDMENT.  Street Address  State  State  Zip  City  NRHODE ISLAND -DO NOT ALTER- Changes require filing of the Address  City  City  NRHODE ISLAND -DO NOT ALTER- Changes require filing of the Address  City	Street, Suite 6  Sof Limited Liability Company and Name or title of Contact Personal Title  Street, Suite 6  Norwood  Sof Limited Liability Company and Name or title of Contact Personal Title  Controller  City  State  Norwood  MA  Sof Each Manager of the Limited Liability Company, if Applicable Fill. In Spaces before using attachments ("X" BOX FOR ATTACHMENT]  Y Modifications to Managers requires filing of Amendment. R.I.G.L. 7-16-12 (a) (2) / 7-16-12 (b) (c) / 7-16-12 (c) / 7-12 (c) / 7-16-12 (c) / 7

This report must be signed in ink by an authorized person pursuant to 7-16-66.



Check No. 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.

10/14/02

RUGER

Print or Type Name of Authorized Person

# To be filed annually between September 1 and November 1



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State Corporations Division 100 North Main Street Providence, Rhode Island 02903-1335 Telephone (401) 222-3040

#### •

#### **LIMITED LIABILITY COMPANY**

ID	Number DLLC 91977	Annual Report for the year 2001
1.	The name of the limited liability compa	iny is:
	WARWICK TACO, LLC	
2.	The address of the principal office of the	ne limited liability company is:
	45 Walpole Street, Suite	e 6, Norwood, MA 02062
3.	The state or other jurisdiction under the	e laws of which it is formed is RHODE ISLAND
4.	The name and address of its resident	agent is: GEORGE M. CAPPELLO
	942 PARK AVENUE CRANSTON RI	
<b>5</b> .	The current mailing address of the lim	ited liability company and the name or title of a person to whom communications
	may be directed are: 45 Walpol	e Street, Suite 6
	Norwood,	MA 02062 Attn: Linda Walsh, Controller
7.	state: <u>'Taco Bell Fast Food</u> If the limited liability company has man Name	Restaurant nagers, the name and address of each manager of the limited liability company Address
 File Che	FOR SECRETARY OF STATE USE ONLY Date:    Date:   1977	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.  WARWICK TACO, LLC  Exact Name of Limited Liability Company  Member  Title  Form No. 632
By:	Ze	Revised 01/99

To be filed annually between September 1 and November 1



## STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335

	LIMIT	ED LIABILITY COMPANY			
ID	Number LL 91977	Annual Report for the year 2000			
1.	The name of the limited liability company is WARWICK TACO, LLC				
2.	The address of the principal office of the lime.  45 Walpole Street, Suite 6	• • •			
3.	. The state or other jurisdiction under the laws	s of which it is formed is: Rhode Island			
4.					
<ul><li>5.</li><li>6.</li></ul>	communications may be directed are: 45  Nor	ted liability company and the name or title of a person to whom Walpole Street, Suite 6 wood, MA 02062 Attn: Linda Walsh, Controller usiness in which the limited liability company is actually engaged in this			
	state: Taco Bell Fast Food Re	staurant			
7.	If the limited liability company has managers	the limited liability company has managers, list the name and address of each manager:			
	Name	Address			
Dat	9-1-00 10112 PAME	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.  WARWICK TACO, LLC  Exact Name of Limited Liability Company  Member  Title			

Form No. 632 Revised - 01/99

To be filed annually between September 1 and November 1

Revised 01/99



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State **Corporations Division** 100 North Main Street Providence, Rhode Island 02903-1335 Telephone (401) 222-3040

#### LIMITED LIABILITY COMPANY

	LIMITED EMPIRITY GOME ANY
ID	Number LL 91977 Annual Report for the year 1999
1.	The name of the limited liability company is:
	WARWICK TACO, LLC
2.	The address of the principal office of the limited liability company is:
	45 WALPOLE STREET, SUITE 6, NORWOOD, MA 02062
3.	The state or other jurisdiction under the laws of which it is formed is RHODE ISLAND
4.	The name and address of its resident agent is: GEORGE M. CAPPELLO
	942 PARK AVENUE CRANSTON, RI 02910
5.	The current mailing address of the limited liability company and the name or title of a person to whom communications
	may be directed are: 45 WALPOLE STREET SHITE 6
	NORWOOD. MA 02062 ATTN: LINDA WALSH, CONTROLLER
7.	A brief statement of the character of the business in which the limited liability company is actually engaged in this state:  TACO BELL FAST FOOD RESTAURANT  If the limited liability company has managers—the name and address of each manager of the limited liability company Name  Address
	report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.  WARWICK TACO. LLC  Exact Name of Limited Liability Company  By MEMBER
Зу:	Title Form No. 632 Revised 01/99



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State Corporations Division 100 North Main Street Providence, Rhode Island 02903-1335 Telephone (401) 222-3040

#### LIMITED LIABILITY: COMPANY

ID	Number LL 91977 Annual Report for the year 1998
1.	The name of the limited liability company is:  WARWICK TACO, LLC
2.	The address of the principal office of the limited liability company is:  45 WALPOLE STREET - SUITE 6 NORWOOD, MA 02062
3. 4.	The state or other jurisdiction under the laws of which it is formed is RHODE ISLAND  The name and address of its resident agent is: GEORGE M. CAPPELLO  942 PARK AVENUE CRANSTON, RI 02910
<b>5</b> . ઼	The current mailing address of the limited liability company and the name or title of a person to whom communications may be directed are: 45 WALPOLE STREET - SUITE 6  NORWOOD, MA 02062 ATTN: LINDA WALSH (OFFICE MANAGER
<ul><li>6.</li><li>7.</li></ul>	A brief statement of the character of the business in which the limited liability company is actually engaged in this state:  FAST FOOD RESTAURANT  If the limited liability company has managers, the name and address of each manager of the limited liability company Name  Address
Da	Under penalty of perjury, I declare and affirm that I have examined the report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.  WARWICK TACO, LLC  Exact Name of Limited Liability Company
File	FOR SECRETARY OF STATE USE ONLY Date: 0 0 0 MEMBER  Title

To be filed annually between September 1 and November 1



# STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335

## LIMITED LIABILITY COMPANY

	THE PROPERTY OF THE PROPERTY O
ID	Number 0091977 Annual Report for the year 1997
1,	The name of the limited liability company is:  WARNICK TACO, LLC
2.	The address of the principal office of the limited liability company is: 45 Walpole Street, Suite 6, Norwood, MA 02062
3.	The state or other jurisdiction under the laws of which it is formed is: Rhode Island
4.	The name and address of its resident agent is: George M. Cappello  942 Park Avenue, Cranston, RI 02910
<b>5</b> .	The current mailing address of the limited liability company and the name or title of a person to whom communications may be directed are: 45 Walpole Street, Ste 6
	Norwood, MA 02062 : Linda Walsh, Controller
	A brief statement of the character of the business in which the limited liability company is actually engaged in this state:  Fast Food Restaurant  If the limited liability company has managers, the name and address of each manager of the limited liability company  Name,  Name,  Name,  Nowoul MA 02062
Dat	PAID  PAID  APR - 1-1998  SECRETARY OF STATE  By Royn  Member Resident  Member Resident  Tile  Teleport, including any accompanying schedules and statements, and that all statements contained herein are true and correct.  WARWICK TACO, LLC  Exact Name of Umited Liability Company  Member Resident  Tile  Ti
Ear-	Alactor A Lacharan Tille