



State of Rhode Island

Department of State - Business Services Division

FILED

Annual Report for the year:

Corporation

2020

OCT 20 2020

BY

9702
2020

→ Filing period: January 1 - March 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by April 1.

1. Entity ID Number 000108534		2. Exact name of the Corporation Leo's Pizzeria & Deli, Inc.												
3. Principal Office Address 365 Hope St.			City Bristol	State RI	Zip 02809									
4. NAICS Code 722513		6. Brief description of the character of business conducted in Rhode Island Full service restaurant												
5. State of Incorporation RI														
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>														
President Name Paul Mancieri			Vice-President Name NA											
Street Address 94-2 Sandy Point Farm Rd			Street Address											
City Portsmouth	State RI	Zip 02871	City	State	Zip									
Secretary Name NA			Treasurer Name NA											
Street Address			Street Address											
City	State	Zip	City	State	Zip									
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>														
Director Name NA			Director Name NA											
Street Address			Street Address											
City	State	Zip	City	State	Zip									
Director Name NA			Director Name NA											
Street Address			Street Address											
City	State	Zip	City	State	Zip									
9. Shares Authorized		10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>												
This information is currently of record in the Department of State. Changes require an additional filing.		<table border="1"> <thead> <tr> <th>NUMBER OF SHARES</th> <th>CLASS/SERIES</th> <th>PAR VALUE</th> </tr> </thead> <tbody> <tr> <td>100</td> <td>none</td> <td>no</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>				NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	100	none	no			
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100	none	no												
11. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the 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 contained herein are true and correct.														
Name of Authorized Representative Paul Mancieri				Date 10/13/2020										
Signature of Authorized Representative <i>[Signature]</i>														