

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

I. Corporate ID No. 12590	2. Name of Corpo TWINS PIZZ				····
3. Street Address Principal B.		·	City	State	Zip
1000 MINERAL SP	RING AVENUE		NORTH PROVIDENCE	RI	02904 -
1. Business Phone No.		5. State of Incorpor			6. SIC Code
4017260549		RHODE ISLA	ND		3079
Brief Description of the Ch RESTAURANT SPECIAL	naracter of Business Con LIZING IN PIZZA	ducted in Rhade Island	D SERVING ALCOHOLIC BEVER	AGES	
8. NAMES AND ADDRI	ESSES OF THE OFF	TCERS ("X" BOX FOR	ATTACHMENT) TILL IN SPACE	S REFORE USING A	TTACUMENTS
			Vice President Name	O.I.D OOII (O.V.	i iveniditia —
Doris DelRicci			. Doris DelRicci		
Street Address			Street Address		
1 Ralston Street			· 1 Ralston Street		
City	State	Zip	City	State	Zip
Providence	RI	02904	· Providence	RI	02904
ecretary Name			Treasurer Name		
Doris DelRicci			Doris DelRicci		
ireet Address			Street Address		
1 Ralston Street		.1 Ralston Street			
City	State	Zip		<u> </u>	,··
Providence	RI	02904	Cny Providence	State R I	<i>Zip</i> 02904
oris DelRicci weel Address Ralston Street			Director Name - Street Address		·······················
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Providence	State	Zip	·City	State	Zip
irector Name	RI	02904	• • • • • • • • • • • • • • • • • • • •		
			Director Name	• • • • • • • •	•••••
ireet Address			Street Address	······································	
ity	State	Zip	City	State	Zip
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as report must be stgr	ied in ink by eline	r the President, Vice	President, Secretary, Assistant	Secretary, Treasu	irer, Receiver o

File Date	2 22-05	
Check No.	30x041	
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FOR SECRE	FARY OF STATE USE ONLY	

this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct. Doris DelRicci Print or Type Name of Officer

PRESIDENT

Title of Officer

Form 630 12/01



Check No.

FOR SECRETARY OF STATE USE ONLY

Matthew A. Brown, Secretary of State Corporations Division 100 North Main Street, Providence, RJ 02903-1335 401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

Filing Period: January (FORM MUST BE TYPED II		g Fee: \$50.00		-		
1. Corporate ID No.	2. Name of Corporati					
12590	TWINS PIZZA,	INC.				
3. Street Address Principal Bi	usiness Office	~ ~~~~~	City	State	Zip	
1000 MINERAL SP	RING AVENUE		NORTH PROVIDENCE	RI	02904-	
4. Business Phone No.		5. State of Incorpora			6. SIC Code	
4017260549		RHODE ISLAN	ND		3079	
7-Brief Description of the Ch RESTAURANT SPECIAL	paracter of Business Conduc LIZING IN PIZZA A	ted in Rhode Island ND ITALIAN FOOL	SERVING ALCOHOLIC BEVER	LAGES		
8. NAMES AND ADDRE	esses of the offic	ERS ("X" BOX FOR	ATTACHMENT) FILL IN SPACE	S BEFORE USING A	TTACHMENTS	
Doris DelRicci			. Doris DelRicci			
Sircet Address	·····		Street Address	···		
1 Ralston Street			.1 Ralston Street			
City	State	Zip	City	State	Zip	
Providence	RI	02904	· Providence	RI	02904	
Secretary Name			Treasurer Name			
Doris DelRicci			Doris DelRicci			
Street Address		* Street Address				
1 Ralston Street			.1 Ralston Street			
Ciry	State	Zip	City	State	Zip	
Providence	RI	02904	. Providence	RI	02904	
Director Name	ESSES OF THE DIREC	TORS ("X" BOX FO	RATTACHMENT) FILL IN SPAC	es before using	ATTACHMENTS	
Doris DelRicci			·			
Street Address			Street Address	····		
1 Ralston Street			•			
City	State	Zip	*City	State	Zip	
Providence	RI	02904				
Director Name			Director Name			
<u> </u>			<u> </u>			
Street Address			·Street Address			
City	State	Zip	City	10		
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i nis report must be sigi	nea in ink by eiiner i	ne President, vice	President, Secretary, Assistant	Secretary, Treasi	urer, Receiver or Trustee	
[] [] [] [] [] [] [] [] [] [] [] [] [] [<u> </u>					
1 2 5	9 0		Under penalty of perjury,	I declare and affirm	that I have examined	
			this report, including any			
12590 DBC 01/10/04	4 12:55:54 DN4	7	and that all statements con			
12 15	- ^とノ		10 1	1.0.	11/2/	
File Date	<u>- ンラ</u>		your K	reside	126/3004	
12	<i>'2/</i> '	1	Significate of Officer		Date	

Doris DelRicci
Print or Type Name of Officer
PRESIDENT

Form 630 12/01

Title of Officer



1. Corporate ID No.

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

STOP PLASE READ INSTRUCTIONS

Filing Period: January 1-March 1	•	Filing Fee: \$50.00
(FORM MUST BE TYPED OR PRINTED IN BLACK)		

2. Name of Corporation

12590	TWINS PIZZA, I	NC.			
3. Street Address Principal Business Offi 1000 Mineral	ce		N. Providence	State	Zip
4. Business Phone No.	-	5. State of Incorporation	ITOVIDENCE	RI	02911 6. SIC Code
7. Brief Description of the Character of E	Business Conducted in Rh	RHODE ISLAND			3079
Restaurant.sp 8.NAMES AND ADDRESSES President Name	ecializing OF THE OFFICE	—in—pi-zza—ar RS (*x* box for attach	nd—italian—food—s MENT) FILLIN SPACES BEI Vice President Name	erving alcoho fore using attachm	Dic beverages
Doris DelRicc	i		Doris DelRicci		
	State	Zip	1 Ralston St.	State	Zip
Providence Secretary Name	RI	.02904	Providence Reasurer Name	RI	02904
Doris DelRicc	i		Doris DelRicci		
	State	Zip	1 Ralston St.	State	Zip
Providence 9. NAMES AND ADDRESSES Director Name	RI OF THE DIRECT	02904 ORS ("X" BOX FOR ATTAC	Providence CHMENT) FILL IN SPACES B Director Name	R I EFORE USING ATTACH	02904 MENTS
Doris DelRicci	i		Street Address		
	State	Zip	City	State	Zip
Providence Director Name	RI	02904.	Director Name		• ,
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED (*.	X* BOX FOR ATTACHI	MENT)	11. SHARES ISSUED ("X" B	OX FOR ATTACHMENT)	
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
600 COMM NO PAR VALUE			600	Capital	no par

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

	* 1 2 5 9 0 *
File Date:	2/20/13
Check No.:	1155
Ву:	Sh-
FOR SECRETARY O	E 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

Delicery Declaration of Officer

Pres, Vue Bas Sec, Treasures.

Farm 630 12802



Edward S. Inman, III, Secretary of States Corporations Division 100 North Main Street, Providence, RJ 02903-1335 401-222-3040

PROFIT CORPO	ORATION All I-March 1 • Fil	NNUAL REP ing Fee: \$50.00	ORT FO	RTHEY	ZEAR <u>200</u>	D2 STO
(FORM MUST BE TYPED IN BLAC 1. Corporate ID No. 12590 3. Street Address Principal Business ()	2. Name of Corporation TWINS PIZZA, IN	C.	City		State	Zip
1000 Mineral 4. Business Phone No.	Spring Aven	S. State of Incorporation RHODE ISLAND	•	vidence	RI	02904 6. SIC Gade 3079
7. Brief Description of the Character n						
Restaurant ST B. NAMES AND ADDRESSI Tresident Name	ecializing : ES OF THE OFFICER	in pizza & it S (*x* BOX FOR ATTACH!	Lalian fo MENT) FILLIN Vice President Nur	SPACES BEFO	ng alcohol	ic beverages
Libero DelRic	cci		Dori Street Address	s DelRi	cci	
1 Ralston St.	• State	Zip		ston St.		
Providence	RI	,	City Provid Treasurer Name	lence	State RI	7.ip 02904
Doris DelRice	ei		Liber Street Address	o DelRic	ci	
1 Ralston St.	State	Zip	1 Ral	ston St.	State	Zip
Providence P. NAMES AND ADDRESSE Director Name	RI ES OF THE DIRECTO	02904 RS ("X" BOX FOR ATTAC		dence In spaces be	RI FORE USING ATTA	02904 ACHMENTS
Libero DelRic	cci		Doris Street Address	DelRico	i	
11Ralston St.	State	Zip	City 1 Ral	ston St.	State	Zip
Providence Director Name	RI	02904	Provi Director Name	dence.	RI	02904
treel Address			Street Address			
lity	State	Zip	City		State	Zip
O. SHARES AUTHORIZED UTHORIZED SHARES	(*X* BOX FOR ATTACHMI	ENT)	11. SHARES I	SSUED (*x* BO	X FOR ATTACHMENT)
umher of Shares	Class/Series	Par Value	Number of Shares		Class/Series	Par Value
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This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



File Date:	2-25-02	
rue Date:		-
Check No.:	1047	
Ry:	Q.	_
		-
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. Corporate ID No.

12590

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

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001

STOP PILASE READ INSTRUCTIONS

riting reriou: january 1-march 1	•	Filling Fee: \$50.00
(FORM MUST BE TYPED IN BLACK)		

12590*

File Date: .

Check No.:

FOR SECRETARY OF STATE USE ONLY

2. Name of Corporation

TWINS PIZZA, INC.

3. Street Address Principal Business (•••	_	City	State	Zip
1000 Mineral 4. Business Phone No.	spring Aven	5. State of Incorporation RHODE ISLAND	N. Providence	RI	02904 6 <u>510 Code</u> 3079
7. Brief Description of the Character	of Business Conducted in Ri	ođe Island			
			italian-food serv	ving-alcoholi	c beverages
8. NAMES AND ADDRESS President Name	ES OF THE OFFICE	RS (*x* box for attachi		ORE USING ATTACHM	•
Libero DelRico	ci.		Doris DelRicci		
1 Ralston St.			1 Ralston St.		
City	State	Zip	City	State	7.lp
Providence Secretary Name	RI .	02904	Providence Treasurer Name	RI	02904
Doris DelRicc.	i		Libero DelRicci Street Address	i	
1 Ralston St.	State	Zip	1 Ralston St.	State	Zip
Providence 9. NAMES AND ADDRESS Director Name Libero DelRice		02904 ORS (*X* BOX FOR ATTAC	Providence HMENT) FILLIN SPACES BI Director Name Doris DelRicci	RI EFORE USING ATTACH	02904 MENTS
Street Address 1 Ralston St.			Street Address 1 Ralston St.		
Providence	State RI	02904	c _{lly} Providence	State RI	^{Zip} 02904
Director Name	•	•	Director Name	•	
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED AUTHORIZED SHARES	("X" BOX FOR ATTACH	MENT)	11. SHARES ISSUED (*X* BI	OX FOR ATTACHMENT)	
Number of Shares	Class/Series	rar Value	Number of Shares	Class/Series	Par Velue
600 SHS NO PAR CO	M		•		, w
			600	Capital	no par
This report must be signe	d in ink by either	the President. Vice Pr	esident Sparotom Assistan	t Socretary Transvers	Pacaivar or Trust
		,	, overetary, resistan	· occietary, measurer,	Receiver of frustee

1111e of Officer

Under penalty of perjury, I declare and affirm that I have examined

that all statements contained herein are true and correct.

this report, including any accompanying schedules and statements, and



(FORM MUST BE TYPED IN BLACK)

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 .	l-March 1	•	Filing	ree:	\$50.00	

. Corporate ID No. 12590	2. Name of Corporation TWINS PIZZA,	INC.			
l. Street Address Principal Business Of	Tice		City	State	Zip
1000 Mineral Sp Business Phone No. 726-0549 Brief Description of the Character of	_	5. State of Incorporation RHODE ISLAND	N. Proviđence	RI	02911 6. SIC Code 3079
·	cializing in	pizza and it	calian food servi AENT) FILLIN SPACES BEFO Vice President Name	ng alcoholic DRE USING ATTACHME	beverages ints
Libero DelRicci	i		Doris DelRicci		
1 Ralston St.	State	Zip	1 Ralston St.	State	Zip
Providence Secretary Name	RI	02904	Providence Treasurer Name	RI	02904
Doris DelRicci			Libero DelRicci		
1 Ralston St.	State	Zip	1 Ralston St.	State	Zip
Providence 9. NAMES AND ADDRESS! Director Name	RI ES OF THE DIRECTO	02904 ORS ("x" BOX FOR ATTAC	Providence, CHMENT) FILL IN SPACES BE Director Name	RI FORE USING ATTACH!	02904 MENTS
Libero DelRicci			Doris DelRicci		
1 Ralston St.	State	Zip	1 Ralston St.	State	Zip
Providence Director Name	RI	02904	Providence Director Name	RI	02904
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED AUTHORIZED SHARES	("X" BOX FOR ATTACHA	MENT)	11. SHARES ISSUED ("X" BI	OX FOR ATTACHMENT)	
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Vulue
600 SHS NO PAR CO	M		600	Capital	n par

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

600



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 Title of Officer

Capital

n par



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 1999 Filing Period: January 1-March 1 • Filing Fee: \$50.00

FORM MUST BE TYPED IN BL	Jacik)	•			13314(*)1334
1. Corporate ID No.	2. Name of Corpora			- 	
12590	TWINS PIZ	ZA, INC.			
3. Street Address Principal Busine		•	Glty	State	Zip
1000 Mineral	Spring Aver	iue	N. Providenc	e RI	02911
4. Business Phone No.		5. State of Incorporation	• •		6. SIC Code
7260549		RHODE ISLANI	D		. 3079
7. Brief Description of the Charact					
			talian_food_ser		
8. NAMES AND ADDRE	SSES OF THE OFF	ICERS ("X" BOX FOR ATTACH	MENT) FILL IN SPACES B	EFORE USING ATTACH!	MENTS
President Name			Vice President Name	•	
Libero DelRic	ci	· - ·-··	Doris DelRicc	1	
Street Address			Street Address	•	
1 Ralston St.		·· p. ·	1 Ralston St.		· ,
•	State	02904	City Drawidonae	State	02904
Providence Secretary Name	. RI		Providence	RI	02904
Doris DelRicc	•		Treasurer Name Libero DelRic	ai	
Street Address	<u></u>		Street Address	<u> </u>	
1 Ralston St.			1 Ralston St.		
City	State	Zip	City	State	Zip
Providence,	RI	02904	Providence	RI	02904
	SSES OF THE DIR	i	CHMENT) FILL IN SPACES	7	1
Director Name			Director Name	7 22 0 12 0 11 17 17 17 17 17 17 17 17 17 17 17 17	
Libero DelRic	ci		Doris DelRicc	i	
Street Address	•		Street Address		
1 Ralston St.	<u> </u>		1 Ralston St		
City	State	Zip	City	State	Zip
Providence	RI	02904	Providence	RI	02904
Director Name			Director Name	• • • • • • • • • • • • • • • • • • • •	••••••••••••••
		** *** · · · · · · · · · · · · · · · ·	<u>:</u>		
Street Address			: Street Address		
City		· -1	.		
City	State	1 Zip	City	State	Zip
10. SHARES AUTHORIZ	ED (eve nov son am	a constraint)	i cuane tectien (1	
AUTHORIZED SHARES	ED (Y BOY LOK NI)	ACHMENIA	11. SHARES ISSUED (*)	(* BOX FOR ATTACHMENT)	
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-	· -		T		Tar value
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i ilis report must de sig	nea in ink DV eitl	ner the President. Vice P	resident, Secretary, Assis	tant Secretary Treasure	er Receiver or Truster

	* 1 2 5 9 0 *
File Date:	leb 11,99
Check No.:	1897
By:FOR SECRETARY OF	F 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. Title of Officer



1. Corporate ID No.

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
401-277-3040

Zip

State

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1998 Filing Period: January 1-March 1 • Filing Fee: \$50.00

City

STOP PILASE READ INSTRUCTIONS

(FORM MUST BE TYPED IN BLACK)

12590 TWINS PIZZA, INC. 3. Street Address Principal Business Office

2. Name of Corporation

1000 Mineral 4. Business Phone No.	Spring Ave	nue S. State of Incorporation	N. Providenc	e RI	6. SIC Code
726-0549 7. Brief Description of the Character	of Business Conducted in R	RHODE ISLAND		,	3079
Restaurant spe	cializing-i	n-pizza-and-it	alian—food-servin	g-alcoholic-b	oeverages
8. NAMES AND ADDRES President Name	SES OF THE OFFIC	ERS (*X* BOX FOR ATTACH	MENT) Vice President Name		•
Libero De Street Address	lRicci		Doris DelRic	ci	
1 Ralston St	- State	Zip	1 Ralston St.	State	Zip
Providence Secretary Name	RI	02904	Providence Treasurer Name	RI	02904
Doris DelRi Street Address	cci		Libero delRic	ci	
1 Ralston St	- State	Zip	1 Ralston St.	State	Zip
Providence 9. NAMES AND ADDRES Director Name	RI SES OF THE DIREC	02904 CTORS ("X" BOX FOR ATTA	Providence CHMENT) Director Name	RI	02904
Libero DelRi	cci		Doris DelRico	i	
1 Ralston St	•		1 Ralston St.		
City	State	Zip	City	State	Zip
Providence	RI	02904	Providence	RI	02904
Libero DelRi	cci		Director Name Doris DelRi	cci	
Street Address			Street Address		
1 Ralston St			1 Ralston St.		
Providence	State RI	^{Zip} 02904	Providence	State RI	Zip
10. SHARES AUTHORIZE AUTHORIZED SHARES			11. SHARES ISSUED ("x" I		02904
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
600 SHS NO PAR CO	DM		600	capital	no par
This report must be sign	ed in ink by eithe	er the President, Vice I	President, Secretary, Assista	nt Secretary, Treasure	r, Receiver or Trustee



James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-277-3040

Zip

State

PROFIT CORPORATION ANNUAL REPORT 1997

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

(FORM MUST BE TYPED IN BLACK)

3. Street Address Principal Business Office

1. Corporate ID No.

City

AUTHORIZED SHARES

600 SHS NO PAR COM

Number of Shares

2. Name of Corporation

12590

TWINS PIZZA, INC.

1000 Minera 4. Business Phone No.	1 Spring	S. State	of incorporation	N. Providence	RI	02911 6. SIC Code
726-0549 7. Brief Description of the Character o	C Business Combusts		HODE ISLAND)		3079
Restaurant spec	ializing.	in knode island . j.p., p i.2.2	a_and_it	alian-food corui	na slashali	- 1 ·
8. NAMES AND ADDRESSI	ES OF THE OF	FICERS (*X* B	OX FOR ATTACHM	IENT)	.ngarconol1	c beverages
Libero DelRicci Sueet Address 1 Ralston St.				Doris DelRicc Street Address 1 Ralston St.	_	
City	State	Zip		City	State	Zip
Providence Secretary Name	RI		02904	Providence Teasurer Name	RI .	02904
Doris DelRicci				Libero DelRicc	i	
1 Ralston St.				1 Ralston St.		
Providence	State F	Zip RI	02904	Providence	State RI	zip 02904
9. NAMES AND ADDRESSE Director Name	S OF THE DIR	ECTORS ("x	BOX FOR ATTAC			02504
Libero DelRicci				Doris DelRicci		
1 Ralston St.	State	Zip		1 Ralston St.	State	Zip
Providence Director Name	RI	•	02904	Providence Director Name	RI	02904
itreet Address				Street Address		

City

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

ESSURE) SHARES

Number of Shares

600

	* 1 2 5 9 0 *
File Date:	1/31/97
Check No.:	1380
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FOR SECRETARY	OF STATE USE ONLY

State

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

Class/Series

Zip

Par Volue

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

Date

Class/Series

capital

Par Value

no par

DORIS DELRICCI
Print or Type Name of Officer

Title of Officer

PROFIT CORPORATION ANNUAL REPORT

1996



State of Rhode Island and Providence Plantations James R. Langevin, Secretary of State

Corporations Division 100 North Main Street Providence, Rhode Island 02903-1335 • (401) 277-3040

Filing Period: January 1-March 1

Filing Fee: \$50.00

RPORATE ID NO.	2. NAME OF CORPORATION	TLEASE TITE UN	PRINT IN BLACK INK.		
12590	i	1778 TMA			
TEET ADDRESS PROVOPAL BUSINESS OF		IZZA, INC.	απγ	STATE	ZIP CODE
1000 Minage	Comina bee				
NESS PHONE NO.	Spring Avenu	3 STATE OF INCORPORATION	N. Providence	RI	02911 6.SC000€
726-0549		RHODE I	SLAND		3079
EF DESCRIPTION OF THE CHARACTER OF	BUSINESS CONDUCTED IN RHOOF ISLA	MD OM			
Restaurant_s	pecializing	in-pi-zza-and	d -italia n-food-sen	r-v-i-ng a-l -col	nol-i-c-heverac
			RESSES OF THE OFF		
DENT NAME	•		WICE PRESIDENT NAME		• • •
Libero DelRi	cci		Doris_DelRicci_		
1 Ralston St	•		11 Ralston St.		
Providence	STATE	ZIP C00E	•	STATE	ZIP C00€
. <u> </u>	RI	02904	Providence	RI	02904_
TARYNAME Doris DelRice	-:		TREASURER NAME		
DOITS DELKIC	C1		Doris DelRicci		
1 Ralston St					
	STATE	ZIP CODE	1 Ralston St.	STATE	T ZIP COD€
Providence	RI	02904	Providence	RI	02904
TOR NAME	9 <u></u> N A M	ES AND ADDI	RESSES OF THE DIRI	ECTORS	
Libero DelRic	cci	ES AND ADDI	Doris DelRicci	ECTORS	
Libero DelRic TADORESS 1 Ralston St	cci		Doris DelRicci STREET ADDRESS 1 Ralston St.		179 0005
Libero DelRic TAMORESS 1 Ralston St	CCi STATE	ZIP COOE	Doris DelRicci STREET ADDRESS 1 Ralston St.	STATE	ZP C002
Libero DelRic TADORESS 1 Ralston St Providence	cci		Doris DelRicci STREET ADDRESS 1 Ralston St.		
Providence	CCi STATE	ZIP COOE	Doris DelRicci STRETT ADDRESS 1 Ralston St. Onv Providence,	STATE	
Libero DelRic TAMORESS 1 Ralston St Providence	CCi STATE	ZIP COOE	Doris DelRicci STRETT ADDRESS 1 Ralston St. Onv Providence,	STATE	
Libero DelRic TADORESS 1 Ralston St Providence TADORESS	CCi STATE	ZP cooε 0 2 9 0 4	DOTIS DelRicci STREET ADDRESS 1 Ralston St. OTY Providence, DRECTOR MANE	STATE	02904
Libero DelRic TADORESS 1 Ralston St Providence TADORESS	STATE RI	ZIP COOE	DOTIS DelRicci STREET ADDRESS 1 Ralston St. OTY Providence, DRECTOR MANE	STATE	
Libero DelRic FAMORESS 1 Ralston St Providence	STATE RI	ZIP COOKE 0 2 9 0 4	Doris DelRicci STREET ADDRESS 1 Ralston St. OTY Providence, DRECTOR MANE STREET ADDRESS	STATE	02904
Libero DelRic TADORESS 1 Ralston St Providence TOR NAME	STATE RI	ZP cooε 0 2 9 0 4	Doris DelRicci STREET ADDRESS 1 Ralston St. OTY Providence, DRECTOR MANE STREET ADDRESS	STATE	02904
Libero DelRic TADORESS 1 Ralston St Providence TOR NAME	STATE RI	ZIP COOKE 0 2 9 0 4	Doris DelRicci STREET ADDRESS 1 Ralston St. OTY Providence, DRECTOR MANE STREET ADDRESS	STATE	02904
Libero DelRic Francess 1 Ralston St Providence TIOR MAME ET ADDRESS MINNERA OF SHARES	STATE RI STATE 1 D . S M AUTHORIZED SHARES CLASS/SERRES	ZP COOE ZP COOE A R E S A U T H O F	DORECTOR HAVE DORIS DELRICCI STREET ADDRESS 1 Ralston St. OTY Providence, DRECTOR MAME STREET ADDRESS OTY MAMBER OF SHARES	STATE RI STATE STATE	02904
Libero DelRic TADORESS 1 Ralston St Providence TOR NAME	STATE RI STATE 1 D . S M AUTHORIZED SHARES CLASS/SERRES	ZP COOE ZP COOE A R E S A U T H O F	DORECTOR HAVE Doris DelRicci STREET ADDRESS 1 Ralston St. OTY Providence, DRECTOR MANE STREET ADDRESS OTY	STATE RI STATE STATE	02904
Libero DelRic Francess 1 Ralston St Providence TIOR MAME ET ADDRESS MINNERA OF SHARES	STATE RI STATE 1 D . S M AUTHORIZED SHARES CLASS/SERRES	ZP COOE ZP COOE A R E S A U T H O F	DORECTOR HAVE DORIS DELRICCI STREET ADDRESS 1 Ralston St. OTY Providence, DRECTOR MAME STREET ADDRESS OTY MAMBER OF SHARES	STATE RI STATE ISSUED SHARES CLASS/SERIES	ZP COOE PAR VALUE
Libero DelRic Francess 1 Ralston St Providence TIOR MAME ET ADDRESS MINNERA OF SHARES	STATE RI STATE 1 D . S M AUTHORIZED SHARES CLASS/SERRES	ZP COOE ZP COOE A R E S A U T H O F	DORECTOR HAVE DORIS DELRICCI STREET ADDRESS 1 Ralston St. OTY Providence, DRECTOR MAME STREET ADDRESS OTY MAMBER OF SHARES	STATE RI STATE ISSUED SHARES CLASS/SERIES	ZP COOE PAR VALUE
Libero DelRic Francess 1 Ralston St Providence TIOR MAME ET ADDRESS MINNERA OF SHARES	STATE RI STATE 1 D . S M AUTHORIZED SHARES CLASS/SERRES	ZP COOE ZP COOE A R E S A U T H O F	DORECTOR HAVE DORIS DELRICCI STREET ADDRESS 1 Ralston St. OTY Providence, DRECTOR MAME STREET ADDRESS OTY MAMBER OF SHARES	STATE RI STATE ISSUED SHARES CLASS/SERIES	ZP COOE PAR VALUE

File Date: 2/14/96
Check No: 1216
By: Ce W

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

Print or Type Name of Officer

DORIS DEL RICCI No. /31/90

State of Rhode Island and Providence Plantations Office of The Secretary of State 100 North Main Street Providence, Rhode Island 02903-1335 401-277-3040

ANNUAL REPORT

Please Type or Print File Annually – Jan. 1 - March 1 Filing Fee \$50.00

Make Checks Payable to: Secretary of State

ALL ENTRIES MUST BE COMPLETED IN FULL OR THE FORM WILL BE RETURNED. 0012590 Corporate ID: _____ Annual Report for the year: ___ THINS PIZZA, INC. Name of Corporation: Business entity organized under the laws of the State of: RI Business Entity is (check one): For foreign entity, address and telephone number of principal office: Business Corporation (See RIGL Chapter 7-1.1) _____ [] Professional Service Corporation (See RIGL Chapter 7-5.1) Brief statement of the character of business conducted in Rhode Island: restaurant specializing in pizza Address and telephone of the principal office of business entity in Rhode _and_italian_food_&_serving_alcoholic Island (Provide street address - Not P.O. Box): . beverages_____ <u> 1000 Mineral Spring Ave.</u> <u> North Providence, RI 029</u> Phone: (401) 726-0549 THE NAMES OF THE OFFICERS ARE: PRESIDENT CITYSTATE Libero DelRicci 1 Ralston St., Providence, RI VICE PRESIDENT STREET ADDRESS CITY/STATE ZIP CODE Doris DelRicci SECRETARY STREET ADDRESS CITY/STATE ZIP CODE Doris DelRicci TREASURER STREET ADDRESS CITY/STATE Libero DelRicci THE NAMES OF THE DIRECTORS ARE: NAME STREET ADDRESS CITY/STATE 71P CODE Libero DelRicci 1 Ralston St., Providence, RI NAME STREET ADDRESS CITY/STATE Doris DelRicci STREET ADDRESS CITY/STATE ZIP CODE NUMBER OF SHARES AUTHORIZED (Rider may be attached) NUMBER OF SHARES ISSUED AND OUTSTANDING (Rider may be attached) Number of Shares 600 Class / Series Capital Number of Shares 600 Class / Series Capital January 10, PRINT OR TYPE NAME OF OFFICER SIGNING Vice President Form 31 1/95 TITLE OF OFFICER SIGNING

DESIGNATED REGISTERED AGENT FOR SERVICE OF PROCESS:

PLEASE NOTE: If the registered office and/or registered agent indicated below is incorrect. Form 9 must be filed.

ALBERT J. LEPORE, ESQ. 226 S. MAIN STREET PROVIDENCE RI 02903 FILED

MAY 1 0 1995

By 1/2/

Filing Fee \$50,00 Payable to: Secretary of State

PLEASE TYPE or PRINT

State of Rhode Island and Providence Plantations Office of The Secretary of State

100 North Main Street Providence, Rhode Island 02903-1335 File Annually
LLC: Sept. 1 - Nov. 1
CORP: Jan. 1 - March 1

401-277-3040 0012590 Corporate ID: 1994 Annual Report for the year: _ THINS PIZZA, INC. Name of Business Entity: Business entity organized under the laws of the State of: Rhode Island Business Entity is (check one): [kx] Business Corporation (See RIGL Chapter 7-1.1) Federal Taxpayer Identification Number: _ [] Professional Service Corporation (See RIGL Chapter 7-5.1) For foreign entity, address and telephone number of principal office: [] Limited Liability Company (See RIGL 7-16) Name, title and mailing address of contact person to whom communications may be directed: Doris DelRicci Vice President Phone (1_Ralston_St_ Address and telephone of the principal office of business entity in Rhode P<u>rovidence, RI</u> Island (Provide street address - Not P.O. Box): Brief statement of the character of business conducted in Rhode Island: 1000 Mineral Spring <u>A</u>ve. r<u>estaurant specializing in pizza and</u> North Providence, RI italian food &serving Alcoholic Bev. 02911 Date of Organization: __ 8/27/62 Phone: (401) 726-0549 Date of Qualification to do business in Rhode Island (if foreign entity). 1 THE NAMES OF THE OFFICERS ARE: CHIEF EXECUTIVE DEFICER OR THE PRESIDENT (CNEX OF /IP CYLOY Libero DelRicci CHIEF OF RATING DIFFICER OR VICE PRESIDENT (Charle) Providence Doris DelRicci
CUSTODIAN OF TRECORDS ON DESCRIPTARY (These Own #P CODE RI ZIP COOE Doris DelRicci ZIP CODE Libero DelRicci <u>o</u>vidence THE NAMES OF THE DIRECTORS ARE: ZIPCODE Libero DelRicci Raiston St. <u>Providence</u> ZUP CODE: Doris DelRicci Ralston st. ZIP CODE NUMBER OF SHARES AUTHORIZED (If Applicable) NUMBER OF SHARES ISSUED AND OUTSTANDING (If Applicable) NUMBER 600 NUMBER 600 Capital **CLASS** capital CLASS SERIES SERIES PAR VALUE OR without par value PAR VALUE OR without par value WITHOUT PAR WITHOUT PAR

March 9,

Doris DelRicci

PRINT OR TYPE NAME OF OTTICEA SIGNING

Vice President

Form 31 1/94

Date

94

DKB - 1243 To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

Corporate ID	2590	Annual Report for	the year1393
FIRST: The name of	the corporation is	TWINS PIZZA, I	NC
Second: It is incorp	orated under the laws of	Rhode Island	
THIRD: Character of	business, briefly stated, is	restaurant speica	lizing in pizza and
it	alian food, also se	rving alcoholic b	everages
FOURTH: If foreign c	orporation, address of its prin	ncipal office	
FIFTH: Business addr	ess in Rhode Island 1000 M	ineral Spring Ave	nue
	North	Providence, RI 02	904
SIXTH: Names and a	ddresses of its directors and o		(Attach rider if necessary)
Libero DelRicci	Director	1 Ralston ST.,	Providence, RI
Doris DelRicci	Director	if	if
	Director		
Libero DelRicci	President	If	II
Doris DelRicci	Vice Presiden	t	n
Doris DelRicci	Secretary	II	n
Libero DelRicci	Treasurer	it	n
	f Shares authorized:		Par Value or statement that shares are without
No of Shares 6 0 0	Class capital	Series	parvalue no par value
	Shares issued:	32.	Par Value or statement that
No. of Shares	Class	Series	shares are without par value
600 capital			no par vlaue
	Ву	TWINS PIZZA, INC. ame of Corporation) Charles Charles the Press	1 /
(Report must be sig	ned by an officer) Tit	ie Wice Press	THE

0 k 1006

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

Corporate ID	0012590	`\ 6	- Annu	al Report for the ye	ar <u>1952</u>
First:	The name of the corpor	ation is	TWI	ds Pizza. imc	
Second	: It is incorporated und	ler the laws of	the State	of Rhode Isla	ınd
THIRD:	Character of business, b	oriefly stated, is	restaurant	specializino	, in pizza and
	talian food, als				
Г ІГГН:	Business address in Rho	de Island		eral Spring A	venue
Ѕіхтн:	Names and addresses of	its directors as		Address (including number	(Attach rider if necessary)
Libero	DelRicci	Director	1 Ralsto	n St., Provid	ence, RI
Doris Del	lRicci	Director			п
Libero De	elRicci	President	1 Ralsto	n St., Provid	ence, RI
	Ricci			n	11
Doris Del	Dissi	Secretary		n	n
Libero De		•	11	n	n
Seventh				••••••	Par Value
No of Sha			Serie	\$	or statement that shares are without par value
600	capital				no par value
Еібнтн:	Number of Shares issue	ed:			Par Value or statement that
No. of Sha	ares Cla	ass	Serie	s	shares are without par value
600	capital			no	par value
Dated ^{Ma}	rch 1, 1	9 9 2	TWINS PIZ	ZZA, INC.	
(Re	eport must be signed by an off	icer)	By I fair	hus + Sic	quell

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

Corporate ID	0012590	Annual Repo	rt for the year	r1991
First: The nan	ne of the corporation is	•		
SECOND: It is in	scorporated under the laws of	Rhode Island	•••••	
THIRD: Charact	er of business, briefly stated, is	s restaurant spe	cializin	g in pizza
and italian	food, also serving	alcoholic bevera	iges	
	eign corporation, address of its			
FIFTH: Business	address in Rhode Island	1000 Mineral S	pring A	venue
	······	North Providen	ce, R.I.	
Sixth: Names a	and addresses of its directors are		including number, s	(Attach rider if necessary)
Libero DelRicc	i Director	1 Ralston St.	, Provide	ence, R.I.
Doris DelRicci	Director	11	ţı	tt .
	Director			
Libero DelRicc		1 Ralston St.		,
Doris DelRicci		dent		***************************************
Doris DelRicci		uent		п
Libero DelRicc	•	ų	· II	н
SEVENTH: Numb	per of Shares authorized:			Par Value or statement that
No. of Shares	Class	Series		shares are without par value
600	capital	PAID	r	no par value
		SEC'Y OF ST.)() 4	
Eighth: Numbe	er of Shares issued:	SEC'Y OF ST	77	Par Value or statement that
No. of Shares	Class	Series Series	ATE.	shares are without par value
600	capital		n	o par value
Dated February	19, 91	TWINS PIZZA, IN	c.	De la
(Report must I	be signed by an officer)	Title Leel De	VIII	C

State of Rhode Island and Providence Plantations CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

Corporate ID	0012590	Annual Rep	port for the year 1990	1 * * * * * * * * * * * * * * * * * * *
FIRST: The	name of the corporation is	TWINS PIZZA, IN	C .	••••••
Second: It	is incorporated under the law	s of Rhode Island		
THIRD: Cha	racter of business, briefly stat	ed, is Restaurant s	pecializing in pizza	
and ital	ian food, also serv	ing alcoholic beve	rages	
Fifth: Busi	ness address in Rhode Island	1000 Mineral Sp	ring Avenue	••••••
••••••	······	North Providence	e, R.I.	
Sixth: Nam	es and addresses of its directo		(Attach rider if nece is (including number, street, zip code)	•
Libero DelR	icci Direc	tor 1 Ralston S	t., Providence, R.I.	ন্ত্ৰ' এ
Doris DelRi	oci Direc	tor		نـ <u>ب</u>
	Direc	tor		سو مو سو
Libero DelR	i cc i Presio		t., Providence, R.I.	==
Doris DelRi	cc i Vice l		11	ئے
Doris DelRi			11	********
Libero DelR		urer "	н	*******
Seventh: N	umber of Shares authorized:		Par Value	
No. of Shares	Class	Series	or statement that shares are without par value	
600	Capital		no par value	
Еіднтн: Nu	mber of Shares issued:		Par Value or statement that	
No. of Shares	Class	Series	shares are without par value	
200	Capital		no par value	
Dated Februa	19 ⁹⁰	TWINS PIZZA, 1	***************************************	
		By Mores La	le fill	******
(Report n	oust be signed by an officer)	Title //ce /	eee.	

State of Rhode Island and Frovidence Flantations CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

Corporate ID	J012590	Annual Re	port for the year	1989
FIRST: The na	ime of the corporation is	TWINS PIZZA, I	NC.	
Second: It is	incorporated under the laws of	f Rhode Island	1	•••••
THIRD: Chara	cter of business, briefly stated,	is Restaurant s	specializing in	pizza
and italia	in food, also serving	g alcoholic beve	rages	
FOURTH: If fo	reign corporation, address of it	s principal office		
FIFTH: Busine	ss address in Rhode Island	1000 Mineral Sp	oring Avenue	
••••••		North Providenc	e, R.I.	
	and addresses of its directors a		(Atta	ch rider if necessary)
Libero DelRic	c i Director	1 Ralston S	t., Providence	
Doris DelRico	i Director	tt	†1	<u></u>
	Director			=
Libero DelRic	c i President	1 Ralston S	t., Providence	, R.I.
Doris DelRicc	i Vice Pres	ident''	11	,
Doris DelRicc			řt.	***************************************
Libero DelRic	•		11	•••••••••••••••••••••
SEVENTH: Nun	aber of Shares authorized:	•••••••••••••••••••••••••••••••••••••••	P _a	r Value
No. of Shares	Class		or state	ement that are without
600	Capital	Series	•	r value
	oup rear		no par v	alue
Еіднтн: Numb	per of Shares issued:		Pa	r Value
No. of Shares	Class	Series	shares	ement that are without - r value
200	Capital		ло par v	value
Dated Februar	y 26, 19 ⁹⁰	TWINS PIZZA,	-	
	··········	(Name of Corporation)	7	
		By Lotes Title Vice per	Merson	ll
(Report mus	t be signed by an officer)	Title Ville Pres	J	

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

Corporate ID	012590	Annu	al Report for the year	r1988	
First: The na	me of the corporation is	TWINS PIZZA	INC.		
SECOND: It is	incorporated under the law	s of Rhode Is	land		
— THIRD:— Charae	cter-of-business; briefly-state	ed, isRestaura	nt_specializin	g_in_pizza	****
and italia	n food, also serv	ing alcoholic	beverages		••••
FOURTH: If for	reign corporation, address o	of its principal office			•••••
FIFTH: Busines	s address in Rhode Island	1000 Minera	l Spring Avenu	е	
		North Provi	dence, R.I.		• • • • •
SIXTH: Names	and addresses of its directo	ors and officers:	Address (including number, s	(Attach rider if necessa	ary)
Libero DelRic	c i Direct	tor 1 Ralsto	on St., Provid	ence, R.I.	ري ري
Doris DelRicc	i Direct	tor''	11	<u></u>	
	Direct	tor			
Libero DelRic	c i Presid	lent 1 Ralsto	on St., Provid	ence, R.I.	- 14年 - 12日 12日 - 11日
Doris DelRicc	iVice F	President	it	"	<u>,</u> ,τi
Doris DelRicc	i Secret	агу	· •	11	کر کرک
Libero DelRic	c i Treasu	urer	ı r	Ft	- 7 5
	nber of Shares authorized:			Par Value or statement that shares are without	
No. of Shares	Class	Serie	25	par value	
600	Capital		по	par value	
Eighth: Numb	per of Shares issued:			Par Value or statement that	
No of Shares	Class	Serie	s	shares are without par value	
200	Capital		no	par value	
Dated Februar	y 26, 19 ⁹⁰	TWINS PIZZ	ZA, INC.		••••
		7 12	a l Oce K	July 1	
(Report mus	be signed by an officer)	Title //ecc	s flee f	Amely put (Till)	

Filing Fce \$15.00

FOR REVOKED CORPORATIONS ONLY

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE. RHODE ISLAND 02903

Corporate ID12590		Annual Report f	or the year1986
FIRST: The name of	the corporation is		
SECOND: It is incorp	porated under the laws of	the State of Rh	ode Island
THIRD: Character-of	f-business, briefly stated, is:	restaurant spec	ializing in pizza
and italian fo	od, also serving a	alcoholic beverage	S
FIFTH: Business add	ress in Rhode Island	1000 Mineral Sp	ring Avenue
	•••••••••••••••••••••••••••••••••••••••	North Providen	ce, R.I.
SIXTH: Names and a	iddresses of its directors and	i officers:	(Attach rider if necessary)
Libero Del Ricci	Director		Providence, R.I.
Doris Del Ricci	Director	F1	
······			
Libero DelRicci	President	1 Ralston St.,	Providence, R.I.
	Vice Preside		rovidence, R.I.
Doris Del Dicci	Secretary	11	11
Libero Del Ricci	Treasurer	11	11
Seventh: Number o	f Shares authorized:		Par Value
No. of Shares	Class	Series	or statement that shares are without par value
600	capital	,	tithout par value
EіGнтн: Number of	Shares issued:		Par Value
No. of Shares	Class To	Series	or statement that shares are without par value
200	capita		without par value
Dated 4 74	OLS CHER CHER 19 MRE	TWINS PIZZA, INC	
JAN 2		Name of Corporation) by Dates De	e Juse
(Report must be sign	ned by an officer)	itle Dec + vee	· Pres

FOR REVOKED CORPORATIONS ONLY

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION 270 WESTMINSTER MALL PROVIDENCE. RHODE ISLAND 02903

Corporate ID. 12590		Annual Report	for the year 1987
FIRST: The name of the corporate	oration is TWINS		
SECOND: It is incorporated un	nder the laws of	the State of Rh	ode Island
THIRD: - Character of business	, briefly-stated, is	restaurant spe	cializing in pizza
and italian food, also	serving alcoho	olic beverages	
FOURTH: If foreign corporation	on, address of its prin	cipal office	······
FIFTH: Business address in RI	node Island 1000) Mineral Sprin	g Avenue
	Nort	h Providence,	R.I.
SIXTH: Names and addresses	Office		(Attach rider if necessary)
Libero DelRicci	Director	1 Ralston St.	, Providence, R.I.
Doris DelRicci	Director	11	II .
	Director	·····	·····
Libero DelRicci	President	1 Ralston St.	, Providence, R.I.
Doris DelRicci	Vice President	11	r!
Doris DelRicci		1)	
Libero DelRicci	Treasurer		
SEVENTH: Number of Shares a			Par Value or statement that shares are without
No. of Shares	Class	Series	par value
	pital 01/07		without par value
EIGHTH: Number of Shares iss	sued: &		Par Value or statement that
No. of Shares	Class PA	Series	shares are without par value
200 ca	pital		without par value
Dated 18/10	19 CHER CHER (Nan	T WINS PIZZA,	INC.
JAN 21 DE	. By	Tileen	Del Rain
(Report must be signed by an o	5.5	Pres.	+ Dreasur

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE. RHODE ISLAND 02903

Corporate ID	12590	······	•••••	Annual Repor	t for the year	L985 V
FIRST:	The name of	the corporation		PIZZA, INC.		
Second	: It is incorp	orated under the		Rhode Isla	nd	•••••
THIRD:	Character of	business, briefly	stated, is	restaura	nt speciali	zing in
pizza		: :		ing alcoholic be		
Fourth				ncipal office		
Г І Г ТН:						
				Providence, Rho		
Ѕіхтн:	Names and ac	ldresses of its di	rectors and o		(/ ncluding number, street,	Attach rider if necessary) zip code)
Libero	DelRicci	I	Director	l Ralstor	St., Prov	., RI
Doris I	DelRicci	I	Director	same as a	bove	
•••••••••	• • • • • • • • • • • • • • • • • • • •	I	Director			
Libero	DelRicci	P	resident	same as a		
Doris I	elRicci	V	ice Presiden	itsame as a		
		S		same as a		
_	DelRicci		reasurer		bove	
Seventh	: Number of	Shares authoriz	æd:			Par Value
No. of Sha	ırs	Class	08/21/85	Series		r statement that ares are without par value
600		capital	L/85		non par	value
Еіснтн:	Number of S	hares issued:	PAID		о	Par Value statement that
No. of Sha	res	Class		Series	shu	tres are without par value
200		capital	ANRE CHEK 0092A001		non par	value
Pated	July30.,	1985		THINS PIZ ame of Corporation) Letter 1 le Letter 1	•	fice:
(Re _l	port must be sign	ed by an officer)	Tit	le Sec + U	u Pres	/

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations OFFICE OF THE SECRETARY OF STATE

Annual Report for the year 1988

FIRST: The name of the corporation is TWINS PIZZA, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is restaurant specializing

in pizza and Italian food, also serving alcoholic beverages.

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island

1000 Mineral Spring Avenue, North Providence, RI

SIXTH: Names and addresses of its directors and officers:

(Addresses must include street and number, if any)

Name Office Address Libero DelRicci Director 1 Ralston St., Prov., RI ... Doris DelRicci Director same as above Director Libero DelRicci President same as above ... Doris DelRicci Vice President same as above. ... Doris DelRicci Secretary same as above ...Lihero DelRicci Treasurer same as above (If additional space is needed, attach rider)

SEVENTH: Number of Shares authorized:

No. of Shares Class Series

Par Value or statement that shares are without par value

600

Capital

non par value

EIGHTH: Number of Shares issued:

Par Value or statement that shares are without par value

No. of Shares

Class

19 84

Capital

Series

3

non par value

1

Dated:

January 20.

CH TWINS PIZZI, INC. (Name of Corporation)

.....

200

By Worrs Wel Ke

<u>Title</u>

(Report must be signed by an officer)

If the corporation has changed its registered office and or its registered agent, Form #9 must be filed. Please contact Corporation Division for information. 277-3040

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations OFFICE OF THE SECRETARY OF STATE

FIRST: The name of the corporation is TWINS PIZZA, INC. SECOND: It is incorporated under the laws of Rhode Island THERD: Character of business, briefly stated, is restaurant specializing in plzza and Italian food, also serving alcoholic beverages. FOURTH: If foreign corporation, address of its principal office FIFTH: Business address in Rhode Island (blank reports will be mailed to thi address) 1000 Mineral Spring Avenue, North Providence, RI SIXTH: Names and addresses of its directors and officers: [Addresses must include street and number, if any) Name Office Address Libero DelRicci Director Libero DelRicci Director Libero DelRicci President Same as above Doris DelRicci Derector Libero DelRicci President Same as above Libero DelRicci Vice President Same as above Libero DelRicci Treasurer (if additional space is needed, attach rider) SEVENTH: Number of Shares authorized: No. of Shares Class Series Class Series Class Series Dated: Dated: Dated: No. of Shares Class Series Date and Italian Third Series Class Series Class Series Date and Third Series Class Series Date and Third Series Class Series Class Series Date and Third Series Class Series Class Series Date and Third Series Class Cl	;	A	nnual Report for the yea	ar . 1983
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THIRD: Character of business, briefly stated, is restaurant specializing in plzza and Italian food, also serving alcoholic beverages. FOURTH: If foreign corporation, address of its principal office FIFTH: Business address in Rhode Island (blank reports will be mailed to thi address) SIXTH: Names and addresses of its directors and officers: [Addresses must include street and number, it any] Name Office Address Libero DelRicci Director 1 Ralston St., Prov., RI Doris DelRicci Director same as above Director Libero DelRicci President same as above Doris DelRicci Secretary same as above Libero DelRicci Secretary same as above Libero DelRicci Treasurer same as above Libero DelRicci Secretary same as above Libero DelRicci Treasurer same as above Libero DelRicci Secretary same as above Libero DelRicci Treasurer same as above Libero DelRicci Treasurer same as above Libero DelRicci Secretary same as above Libero DelRicci Secretary same as above Libero DelRicci Treasurer same as above Libero DelRicci Treasurer same as above Libero DelRicci Secretary same as above Libero DelRicci Secretary same as above Libero DelRicci Treasurer same as above Libero DelRicci Secretary same as above Libero DelRicci Secretary same as above Libero DelRicci Treasurer same as above Libero DelRicci Secretary same as above Libero DelRicci Secretary same as above Libero DelRicci Secretary same as above Libero DelRicci Treasurer same as above Libero DelRicci Secretary same as above Doris DelRi	SECOND: It is		Phodo Icl	
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FIFTH: Business address in Rhode Island (blank reports will be mailed to thi address) 1000 Mineral Spring Avenue, North Providence, RI SIXTH: Names and addresses of its directors and officers: (Addresses must include street and number, it any) Name Office Address Libero DelRicci Director 1 Ralston St., Prov., RI Doris DelRicci Director same as above Director Libero DelRicci President same as above Doris DelRicci Secretary same as above Libero DelRicci Secretary same as above Libero DelRicci Treasurer same as above (If additional space is needed, attach rider) SEVENTH: Number of Shares authorized: No. of Shares Class Series Par Value or statement that shares are without par value EIGHTH: Number of Shares issued: No. of Shares Class Series Par Value or attacement that shares are without par value The Value or attacement that shares are without par value Office Address Par Value or attacement that shares are without par value Doris DelRicci Treasurer Series Par Value or attacement that shares are without par value Doris DelRicci Treasurer Series Par Value or attacement that shares are without par value EIGHTH: Number of Shares issued: No. of Shares Class Series Par Value or attacement that shares are without par value Doris DelRicci Treasurer Series Par Value or attacement that shares are without par value				
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SIXTH: Names and addresses of its directors and officers: (Addresses must include street and number, if any) Name Office Address Libero DelRicci Director 1 Ralston St., Prov., RI Doris DelRicci Director same as above Director Libero DelRicci President same as above Doris DelRicci Secretary same as above Libero DelRicci Secretary same as above (If additional space is needed, attach rider) SEVENTH: Number of Shares authorized: No. of Shares Class Series Par Value or statement that shares are without par value EIGHTH: Number of Shares issued: No of Shares Class Series Par Value or statement that shares are without par value The par Value or statement that shares are without par value Of Shares Class Series Par Value or statement that shares are without par value The par Value or statement that shares are without par value Of Shares Class Series Par Value or statement that shares are without par value The par Value or statement that shares are without par value Of Shares Class Series Par Value or statement that shares are without par value The par Value or statement that shares are without par value The par Value or statement that shares are without par value The par Value or statement that shares are without par value The par Value or statement that shares are without par value The par Value or statement that shares are without par value The par Value or statement that shares are without par value The par Value or statement that shares are without par value The par Value or statement that shares are without par value	- I			
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Doris DelRicci Vice President same as above Doris DelRicci Secretary same as above Libero DelRicci Treasurer same as above (If additional space is needed, attach rider) SEVENTH: Number of Shares authorized: No. of Shares Class Series Par Value or statement that shares are without part value EIGHTH: Number of Shares issued: No. of Shares Class Series Par Value or statement that shares are without part value EIGHTH: Number of Shares issued: No. of Shares Class Series Par Value or statement that shares are without par value 200 Capital non par value	ļ	Director		
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Libero DelRicci Treasurer (If additional space is needed, attach rider) SEVENTH: Number of Shares authorized: No. of Shares Class Class Series Par Value or statement that shares are without par value 100 Capital 100 Cap	Doris DelRicci	Vice Presider	nt same as above	
Treasurer SEVENTH: Number of Shares authorized: No. of Shares Class Class Series Par Value or statement that shares are without par value non par value Capital No. of Shares Class Class Series Par Value or statement that shares are without par value Capital No. of Shares Class Class Series Par Value or statement that shares are without par value Capital No. of Shares Class Class Series No. of Shares Class Class Series non par value non par value	Doris DelRicci	Secretary	same as above	
No. of Shares Class Class Series Or statement that shares are without par value non par value EIGHTH: Number of Shares issued: No. of Shares Class Series Par Value or statement that shares are without par value 200 Capital non par value non par value		Treasurer	same as above	.
No. of Shares Class Series Shares are without par value 600 Capital non par value EIGHTH: Number of Shares issued: No. of Shares Class Series Par Value or statement that shares are without par value 200 Capital non par value	SEVENTH: Nu	umber of Shares authoriz	zed:	
EIGHTH: Number of Shares issued: No. of Shares Class Series Par Value or statement that shares are without par value 200 Capital non par value	No. of Shares	Class	Series	shares are without
No. of Shares Class Series or statement that shares are without par value 200 Capital non par value	600	Capital	n o i	n par value
No of Shares Class Series par value 200 Capital non par value				or statement that
3 /c 2 2 2 1 2 2 1 2 1 2 1 2 1 2 1 2 1 2 1	No. of Shares	Class	Series	par value
Dated: 3/9 19 63 June of Corporation) Name of Corporation	200	Capital 🗮	noi	n par value
21 1989 B : By Carry Carry		19 - 3 83 - 7 84 - B ₁	Muce of Corporation)	a Suc e fecce
MAR 31 190	MAR 3 2	Ti	itle JC	
(Report must be signed by an officer)	· /		(Report must be signed	d by an officer)
If the corporation has changed its beginnered office and/or its registered agent,	If the corporat	tion has changed its sedister	red office and/or its regi	stered agent

FORM 31 11582

State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

		•	Annual Repo	ort for the ye	ar 1902
First:	The name of the	e corporation	is TWIN	IS PIZZA.	INC
, , .					
SECOND:	It is incorpora	ated under the	e laws of	Rhode Isl	and
THIRD:	Character of bu	siness, briefly	stated, is	restauran	t specializing
jn pizza	and Italian	food, also	serving al	coholic b	evçrages,
Fourth:	If foreign co	rporation, add	dress of its	principal of	ice
Firth:	Business address	ss in Rhode L	sland (blank	reports wi	ll be mailed to this
add: ess) 1	000 Mineral	Spring Aver	nue, North	Prov., R	t
Sixth:	Names and add	resses of its	directors an	d officers:	
ļ.	(Addresses mus	st Include street ar	nd number, if an	y)	deministratify (
l N	lame	Office		Addı	ress
Libero D	elRicci	Director	1 Ralst	on St., P	roy., RI
Doris De	lRicci	Director	same as	above	
		Director			
Libero D	elRicci	President	l Ralst	on St., P	rov., RJ
Doris De	IRicci	Vice Preside	nt same as	above	
Doris De	1Ricci	Secretary	same as	above	
	elRicci ce is needed, attach	. Treasurer	same as	above	
SEVENTH	: Number of S	Shares author	ized:		Par Value
No.inf Sha	res	Class	Serie	23	or statement that shares are without par value
6,00	Cap	ital			non par value
Еіснтн:	Number of S	Shares issued:		_	Par Value or statement that
No. of Sha	res	Class	Sovi	2.	shares are without par value
200	Ca	pital N	ne 3 to	₽ 2]	non par value
Dated: F	ebruary 22,	19.82	TWINS (Name of Cor		NC.
,			Title	ec Pil	i Part
; !		į		t must be sign	ed by an officer)
ı			L	• ;	

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations Office of the Secretary of State

ANNUAL REPORT

OF

***************************************	Twins Pizza	, Inc.	
Pursuant to the pro- amended, the undersigne	visions of Section 7 d corporation here	7.1.1-118 of the Gene by submits the follow	eral Laws, 1956, as wing annual report:
First: The name o	f the corporation is	Twins Pizza, Inc.	}}****
		aws of RI.	
		office in Rhode Island	
78 William Street, Npt and the name of its regi	RI: stered agent in Rh	}}************************************	dress is
FOURTH: If a fore or country under the law	ign corporation, the sof which it is inc	e address of its principorporated is	pal office in the state
Island, briefly stated, is also serving alcoholic b	restaurant specia everages.		Italian Food
	and respective add	resses of its directors	and officers are:
Libero Del Ricci	Office Director	1 Raiston St. Prov	Address . RI.
Doris Del Ricci	Director		
·····			
	Director		
er announced one companies approximation	Director		
· · · · · · · · · · · · · · · · · · ·	Director		
ibero Del Ricci	President		
Doris Del Ricci	Vice Preside	ent	***************************************
Ooris Del Ricci	Secretary	*	
iberto Del Ricci	Treasurer	0,0000	Marrows
SEVENTH: The aggre by classes, par value of shar	gate number of shares, shares without p	res which it has author par value,and series,if a	ity to issue, itemized any,within a class,is:
Number of Shares	Class	Series	Par Value per Share or Statement that Shares and without Par Value
600	Capital		NPV 81
		APR 1 3 1981	· 404A

PR 1 3 1981

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Eighth: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	Series	Por Value per Share or Statement that Shares are without Par Value
200	Capital		NPV

Dated 2/// ,19.81 Twins Pizza, Inc.

By Afores Alel Lecce

•

sis.oo To be filed annually between January 1st and March 1st 1980 State of Rhode Island and Providence Plantations OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT OF

	92		
	Twins Pizza, I	nc.	
amended, the undersigned First: The name of	ed corporation hereby of the corporation is	.1.1-118 of the y submits the i	General Laws, 1956, as following annual report:
SECOND: It is inco	prporated under the l	aws of Rhode	Island
THIRD: The addres	s of its registered officace, Newport, RI. 02	0.40	d is
and the name of its regist Daniel F. Kiley, Esc		sland at such ad	dress is
FOURTH: If a fore country under the laws of	ign corporation, the a which it is incorporate	ddress of its prind is	ncipal office in the state or
FIFTH: The characterists also serving alcoholic	eter of the business in	n which it is ac	tually engaged in Rhode
Name	and respective addres		Address
Libero Del Ricci Doris Del Ricci	Director Director		t. Prov. RI.
	Director		
·	Director Director		
i i	Director		
Libero Del Ricci	President		
Doris Del Ricci	Vice Presiden		
Doris Del Ricci	Secretary		
Libero Del Ricci	Treasurer		
SEVENTH: The aggre by classes, par value of sha	egate number of share res, shares without pa	s which it has au rvalue,andserie	thority to issue, itemized s,ifany,withinaclass,is:
Number of Shares	Class	<u>Series</u>	Par Value per Share or Statement that Shares are without Par Value
600	Capital		, NbA

APR 30 1980

PR.

Form 31 8-79

EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	Series	or Statement that Shares are without Par Value
200	Capital		NPV

Dated 4-4 ,19 % Twins Pizza, Inc.
(NAME OF CORPORATION)

By Khris Del Recci 115 Vice Pres. + Soc.

To be filed annually 19 between January 1st and March 1st 1979

State of Rhode Island and Providence Plantations OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT

		OF		
***************************************	Twin	s Pizza,	Inc.	
FIRST: The	the provisions of Secretarion corporation ame of the corporat	ection 7.1 n hereby tion is	.1-118 of the	e General Laws, 1956, a following annual report
				Island
THIRD: The:	address of its registe ket Place, Npt. RI	ered office	in Rhode Isla	nd is
•	registered agent in	Rhode Isla	and at such a	ddress is
country under the la	a foreign corporations of which it is inco	on, the add	lress of its pr	incipal office in the state or
				actually engaged in Rhode
			4	
SIXTH: The n	ames and respective	addresse	of its direct	ors and officers are:
Libero Del Rice		UE:00		Address St. Prov. RI.
Doris Del Ricc		·		
	Direct		sameasap(Dve
		- "		
······································	Direct	or		***************************************
	Direct	or		
Libero Del Rico	reside	ent	same as abo	ove
Doris Del Ricci Doris Del Ricci	Vice P	resident	sameasabo	¥ e
Libero Del Ricc			**************************************	
SEVENTH: The by classes, par value of	aggregate number o of shares, shares wit	of shares w houtpary	hich it has a alue,andseri	uthority to issue, itemized es,ifany,withinaclass,is: Par Value per Share
Number of Shares	Class	5	Series	or Statement that Shares are without Par Value
600	Capital	79		NPV
Form 31 30M 11-78		7882A14····15(1979 JUN 6 1979

EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Par Value per Share or Statement that Shares are without Par Value Number of Shares Series Class NPV 200 Capital

Dated 4/11

, 1979

Twins Pizza, Inc.

By Libero Del Revel

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1 Dones Del Revel Lectone Mes

To be filed annually 1978 between January 1st and March 1st

State of Chode Island and Providence Plantations OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT

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	Twins Pizza	, Inc.
Pursuant to the provis	ions of Section 7.1 prporation hereby subsection is The corporation is	1.1-118 of the General Laws, 1956, as abmits the following annual report: wins Pizza, Inc.
SECOND: It is incorpor	ated under the laws	of Rhode Island
THIRD: The address of 124 Brick Market Place	its registered office ce, Newport, RI. O	in Rhode Island is 2840
		and at such address is
country under the laws of whi	corporation, the add ch it is incorporated	lress of its principal office in the state or
Island, briefly stated, is alcoholic beverages. SIXTH: The names and re	staurant speciali:	which it is actually engaged in Rhode zing in pizza and Italian food also servin fits directors and officers are:
Name Libero Del Ricci	Office Director	Address I Ralston St. Prov, RI
Doris Del Ricci	Director	same as above
	Director	
	Director	
	Director	
I shawa Dal Dinas	Director	
Libero Del Ricci	President	same as above
Doris Del Ricci	Vice President	same as above
Doris Del Ricci	Secretary	same as above
Libero Del Ricci	Treasurer	same as above
SEVENTH: The aggrega by classes, par value of shares,	ite number of shares shares without par v	which it has authority to issue, itemized alue, and series, if any, within a class, is:

Par Value per Share or Statement that Shares are without Par Value Number of Shares Class Series Capitla no par value

EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	Series	or Statement that Shares are without Par Value
200	Capital		no par value

Dated /-30, 1978 Twins Pizza, Inc.

(NAME OF CORPORATION)

By Lilen All Recain

Its Pres.

To be filed annually 1977 between January 1st and March 1st

State of Rhode Island and Providence Plantations OFFICE OF THE SECRETARY OF STATE

	TOP OF THE SECT	ETARY OF S	TATE
•	ANNUAL R	EPORT	
:	OF		
	TWINS PIZZA	. INC.	
Pursuant to the pr	rovisions of Section 7	7.1.1.118 of the	General Laws, 1956, as
amenued, the undersign	ed corporation hereby	submits the follo	owing annual report:
SECOND: It is inco	rporated under the lav		sland
THIRD: The addre	oca of ita moniatoreal - CC	and a District	dis Sland 02840
and the name of its regist	tered agent in Rhode Is	land at such add	ress is
FOURTH: If a fore	eign corporation, the act which it is incorporate	idress of its prin	cipal office in the state or
ISIANO, brietly stated is	restaurant speci	ailzing in pizz	tually engaged in Rhode a and Italian food
SIXTH: The names ar	nd respective addresses		Address
Dori's Del Ricci	Director		Street, Providence, RI
1			
	Director		***************************************
		T IN CONTROL AND ADDRESS OF A	
	Director		
Libero Del Ricci			
Doris Del Ricci	Vice President		
Doris Del Ricci	Secretary	t same	Mary Triplespeer Triplespeer
Libero Del Ricci	Treasurer	same	
SEVENTH: The agg	regate number of share	es which it has au	thority to issue, itemized, if any, within a class, is:
Number of Shares	Class	Series	Par Value per Share or Statement that Shares are without Par Value
600	capital		no par value
:	4	MAR 4	1977

EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Clase	Series	Par Value per Share or Statement that Shares are without Par Value
200	capita!		no par value

Dated 2- 11, 1977 THINS PIZZA, INC.

(NAME OF CORPORATION)

By Librar Tel Price

Its Pres.

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT

OF

TWINS PIZZA, INC.

Pursuant to the provisions of Section 7-1.1-118 of the General Laws, 1956, as amended, the undersigned corporation hereby submits the following annual report:

FIRST: The name of the corporation is TWINS PIZZA, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: The address of its registered office in Rhode Island is

10 Jefferson Boulevard, Warwick, R.I., C2888

and the name of its registered agent in Rhode Island at such address is

Daniel F. Kiley, Esq.

FOURTH: If a foreign corporation, the address of its principal office in the state or country under the laws of which it is incorporated is

FIFTH: The character of the business in which it is actually engaged in Rhode Island, briefly stated, is restaurant specializing in pizza and Italian food also serving alcoholic beverages.

SIXTH: The names and respective addresses of its directors and officers are: Address

	Office	Address
Libero Del Ricci	Director	1 Ralston St., Providence
Doris Del Ricci	Director	same
	Director	
	Director	
	Director	
	Director	<u>.</u>
Libero Del Ricci	President	same
Doris Del Ricci	Vice President	same
Doris Del Ricci	Secretary	same
Libero Del Ricci	Treasurer	same

SEVENTH: The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	<u>Series</u>	or Statement that Shares are without Par Value
60C	capital		no par value

FEB 25 197

EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	Series	Pnr Value per Share or Statement that Shares are without Par Value
200	canital		no par value

Dated 1/1.7 ,1976

TWINS PIZZA INC.
(NAME OF CORPORATION)

By Claric Hel Rice.

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT

OF

Dubound to the control	TWINS PIZ	ZA, INC.	· · · · · · · · · · · · · · · · · · ·
amended the undersigned on	ions of Section	7-1.1-118 of the	General Laws, 1956, as
amended, the undersigned co First: The name of th	poration nereby	Submits the follow	ing annual report:
- more whe hame of the	e corporation is		AAA, IN C.
O		Control of the second of the	
SECOND: It is incorpor	ated under the lav	ws of Rhode Islan	n đ
THIRD: The address of	its registered offi ard, Warwick, R	ce in Rhode Island hode Island	lis
and the name of its registered			oce je
Danı	el F. Kiley		
FOURTH: If a foreign of	orporation, the a	ddress of its princ	ipal office in the state or
country under the laws of whi	ich it is incorpora	ted is	
FIFTH: The character	of the husiness i	n which it is not	
Island, briefly stated, is res	taurant special:	n which it is acti Izing in Dizza ar	uany engaged in Rhode
food; also serving	alcoholicbevers	iges.	
		·#+	the second control of
Siyru. The names and		• • • • • • • • • • • • • • • • • • • •	
SIXTH: The names and r	espective address Office	ses of its directors	and officers are:
Libero DelRicci	Director	1 Ralston St.,P	
Doris DelRicci	Director	1 Ralston St.,P	rovidence
Control of the second of the second	Director	en la companya de la	
And the second of the second of the second	Director	er e e	en en entre de la companya de la co
the state of the s	Director	the second second second	
more and a second	Director		
Libero DelRicci	President	вале ав ароче	ere ere ere ere ere ere ere ere ere er
Doris DelRicci	Vice President	same as above	
Doris DelRicci	Secretary	same as above	
Libero DelRicci	Treasurer	same as above	
SEVENTH: The aggregat	e number of share	e which it has out	novitu to ionus itami
by classes, par value of shares, s	hares without par	value, and series, i	if any, within a class, is
	,		Par Value per Share
Number of Shares	Class	Series	or Statement that Shares are without
600 Capi		<u> </u>	Par Value
;	-		no par value

EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Par Value per Share or Statement that Shares are without Par Value Number of Shares Class Series no par value 200 Capital

Dated 6/2 , 19.75

TWINS PIZZA, INC.
(NAME OF CORPORATION)

By Clares Cle Record

To be filed annually 1974 between January 1st and March 1st

State of Rhode Island and Providence Plantations OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT

OF

	1 1	1	TWINS P	IZZA, INC.		
F	IRST:	nt to the p e undersign The nam	Provisions of Section ned corporation hereby e of the corporation is	7-1.1-118 of y submits the	the Ge followi	eneral Laws, 1956, a ng annual report:
	. i		TWINS PI	ZZA, INC.		1·va(-)4·sa(4)vv/))+4···*a(4)+4····
S	ECOND	: It is inc	corporated under the la	ws of Rho	de Isl	and
T	HIRD:	The addi	ess of its registered of	fice in Rhodo	Inland :	_
***************************************	1	2.74.2 P. CY 'SO'	r bourevard Warw	ick. Rhoda	. Tal	
	A 21001116	· or iro i eki:	stered agent in Rhode i	Island at enal	• • • • • • • • •	. :_
F	OURTH	: If a for	eign corporation, the a of which it is incorpor	address of ite	nrinain	ol •80 • - : - : :
,	food	; also s	acter of the business restaurant spec	ecializing Deverages,		_
Siz	TH:	The names	and respective addres	ses of its dire	ctors an	d officers are:
Doris	DelRi	icci	Director	.lRalstor	1St.,	Providence, R.I.
			Director			n
	i i		Director	***********************		
			Director	************************		***************************************
	Į.		Director	}}		**(************************************
Libero	DelR	icci	President	1 2210400		
Doris	DelRi	cci	Vice President	"T""VGTS COU		Providence, R.I.
			Sacratami	n		
Libero	DelR	icci		11	n	II
Sev by classe:	ENTH : s, par v	The aggr alue of sha	regate number of share res, shares without par	o mhich is t		ity to issue, itemized ny, within a class, is : Par Value per Share or Statement that
<u> </u>	Shares	•	Cinsa	Series		Shares are without Par Value
6	00		Capital			no par value

APR 6 1974

EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

shares, shares without par value, estimates,			• ,	Par Value per Share or Statement that
•	Number of Shares	Class	Series	Shares are without Par Volue
	200	Capital		no par value

Dated_April 1,, 19.74

TWINS PIZZA, INC.

By Clores Del Rica.

OL 10-74 \$5575 .596 AR***15.00

C

To be filed annually between January 1st and March 1st

State of Ahode Island and Providence Plantations OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT

OF

TWINS PIZZ	A, INC.	
Pursuant to the provisions of Section 7 amended, the undersigned corporation hereby	submits the	following annual report:
FRST: The name of the corporation is	TWINS P	IZZA, INC.
SECOND: It is incorporated under the la	ws of Rho	de Island
THIRD: The address of its registered offi	ce in Rhode I	sland is 1000 Mineral Spring
and the name of its registered agent in Rhode Anthony A. Gian	Island at such	address is
FOURTH: If a foreign corporation, the accountry under the laws of which it is incorporate	dress of its p	rincipal office in the state or
FIFTH: The character of the business in who riefly stated, is operating and conduct room and dining room.	ich it is actua ting a caf	lly engaged in Rhode Island, eteria, pizzaria, lunch
SIXTH: The names and respective addres	ses of its dire	
Libero Del Ricci Director	l Ralsto	Address On Street, Providence
Doris Del Ricci Director	l Ralato	on Street, Providence
Director		
Director		•
Director	*************	
Director		
Libero Del Ricci President	l Ralsto	n Street, Providence
Doris Del Ricci Vice President	l Ralsto	n Street, Providence
Doris Del Ricci Secretary	l Ralsto	n Street, Providence
Libero Del Ricci Treasurer		n Street, Providence
SEVENTH: The aggregate number of shares classes, par value of shares, shares without par	which it has a	authority to issue, itemized ies, if any, within a class, is:
Númber of Shares Class	Series	Par Value per Share or Statement that Shares are without Par Value
common common		without par value

EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares 200

 $\frac{Class}{\texttt{COEFOR}}$

Series

Par Value per Share
or Statement that
Shares are without
Par Value
without par value

Dated 4-27, 1973

TWINS PIZZA, INC.

By Liber Oil Ricci

1-72 WE PE 5:9 JAN 1

1

To be filed annually between January 1st and March 1st

State of Thode Island and Providence Plantations OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT

O	F			
TWINS PIZ	ZA, INC.			
Pursuant to the provisions of Section amended, the undersigned corporation hereb First: The name of the corporation is	y submits the fo	ollowing an	nual report.	
en e		· · · · · · · · · · · · · · · · · · ·		
SECOND: It is incorporated under the l	aws of Rhode	Island		
THIRD: The address of its registered of Avenue, North Provi	ffice in Rhode Is dence	land is 1000) Mineral Spr	in
and the name of its registered agent in Rhode Anthony A. Giann	iini, Esq.		ere de la companya d	
FOURTH: If a foreign corporation, the a country under the laws of which it is incorporation.	address of its pr rated is	incipal offic	e in the state or	
FIFTH: The character of the business in w briefly stated, is operating and concand dining room. SIXTH: The names and respective all.	aucting a ca	feteria,	pizzaria, lu	nc
Sixth: The names and respective addre	sses of its direct	ors and offic	ters are:	
Libero Del Ricci Director	1 Ralsto		Providence	
Doris Del Ricci Director			Providence	
Director			• •	
Director				
Director				
Director		e e de la companya d		
Libero Del Ricci President	l Ralston		Providence	
Doris Del Ricci Vice President			Providence	
Doris Del Ricci Secretary			Providence	
Libero Del Ricci Treasurer			Providence	
SEVENTH: The aggregate number of share by classes, par value of shares, shares without par	an ambiatati is i			
Number of Shares Class Common	Series .	Par V or St Share F	niue per Share alement that is are without or Value par Value	

MAY 1 - 1973

EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares 200

Common.

Series

Par Value per Share or Statement that Shares are without Par Value

without par value

Dated 4-27, 1973

TWINS PIZZA, INC.

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