



# PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 43398		2. Name of Corporation Martinez and German Liquors, Inc.			
3. Street Address Principal Business Office 310-314 CRANSTON STREET			City PROVIDENCE	State RI	Zip 02907
4. Business Phone No. 4017517752		5. State of Incorporation RHODE ISLAND			6. SIC Code 8888
7. Brief Description of the Character of Business Conducted in Rhode Island SELLING ALCOHOLIC AND NON-ALCOHOLIC BEVERAGES AND RELATED FOOD ITEMS					
8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Raul Martinez, Jr.			Vice President Name Raul Martinez, Jr.		
Street Address 331 Dexter Street			Street Address 331 Dexter Street		
City Providence	State RI	Zip 02907	City Providence	State RI	Zip 02907
Secretary Name Jacqueline Martinez			Treasurer Name Raul Martinez, Jr.		
Street Address 331 Dexter Street			Street Address 331 Dexter Street		
City Providence	State RI	Zip 02907	City Providence	State RI	Zip 02907
9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Raul Martinez, Jr.			Director Name		
Street Address 331 Dexter Street			Street Address		
City Providence	State RI	Zip 02907	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
AUTHORIZED SHARES					
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1,000	NO PAR VALUE		200	Common	no par value
11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
ISSUED SHARES					
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value

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



4 3 3 9 8

\*43398 DBC 01/10/05 10:47:25 AM\*

File Date 5/26/05

Check No. 101721

By: OW

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer [Signature] Date 5/23/05

Raul Martinez, Jr.

Print or Type Name of Officer

President

Title of Officer



**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004**

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

1. Corporate ID No <b>43398</b>		2. Name of Corporation <b>Martinez and German Liquors, Inc.</b>			
3. Street Address Principal Business Office <b>310-314 Cranston Street</b>			City <b>Providence</b>	State <b>RI</b>	Zip <b>02907</b>
4. Business Phone No <b>(401) 751-7752</b>		5. State of Incorporation <b>RHODE ISLAND</b>			6. SIC Code <b>8888</b>
7. Brief Description of the Character of Business Conducted in Rhode Island <b>SELLING ALCOHOLIC AND NON-ALCOHOLIC BEVERAGES AND RELATED FOOD ITEMS</b>					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name <b>Raul Martinez, Jr.</b>			Vice President Name <b>Raul Martinez, Jr.</b>		
Street Address <b>331 Dexter Street</b>			Street Address <b>331 Dexter Street</b>		
City <b>Providence</b>	State <b>RI</b>	Zip <b>02907</b>	City <b>Providence</b>	State <b>RI</b>	Zip <b>02907</b>
Secretary Name <b>Jacqueline Martinez</b>			Treasurer Name <b>Raul Martinez, Jr.</b>		
Street Address <b>331 Dexter Street</b>			Street Address <b>331 Dexter Street</b>		
City <b>Providence</b>	State <b>RI</b>	Zip <b>02907</b>	City <b>Providence</b>	State <b>RI</b>	Zip <b>02907</b>
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name <b>Raul Martinez</b>			Director Name		
Street Address <b>331 Dexter Street</b>			Street Address		
City <b>Providence</b>	State <b>RI</b>	Zip <b>02907</b>	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
<b>1,000 NO PAR VALUE</b>			<b>200</b>	<b>Common</b>	<b>no par value</b>

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



\* 4 3 3 9 8 \*

File Date 6-29-04

Check No. 101065

By: 10P

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer [Signature] Date 6/22/04

**Raul Martinez, Jr.**

Print or Type Name of Officer

**President**

Title of Officer

**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003**  
Filing Period: January 1-March 1 • Filing Fee: \$50.00



(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. **43398** 2. Name of Corporation **Martinez and German Liquors, Inc.**  
3. Street Address Principal Business Office **310-314 Cranston Street** City **Providence** State **RI** Zip **02907**  
4. Business Phone No. **(401) 751-7752** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **8888**

7. Brief Description of the Character of Business Conducted in Rhode Island  
**Selling alcoholic and non-alcoholic beverages and related food items.**

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

President Name <b>Raul Martinez, Jr.</b>	Vice President Name <b>Raul Martinez, Jr.</b>
Street Address <b>331 Dexter Street</b>	Street Address <b>331 Dexter Street</b>
City <b>Providence</b> State <b>RI</b> Zip <b>02907</b>	City <b>Providence</b> State <b>RI</b> Zip <b>02907</b>
Secretary Name <b>Jacqueline Martinez</b>	Treasurer Name <b>Raul Martinez, Jr.</b>
Street Address <b>331 Dexter Street</b>	Street Address <b>331 Dexter Street</b>
City <b>Providence</b> State <b>RI</b> Zip <b>02907</b>	City <b>Providence</b> State <b>RI</b> Zip <b>02907</b>

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

Director Name <b>Raul Martinez</b>	Director Name
Street Address <b>331 Dexter Street</b>	Street Address
City <b>Providence</b> State <b>RI</b> Zip <b>02907</b>	City State Zip
Director Name	Director Name
Street Address	Street Address
City State Zip	City State Zip

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

AUTHORIZED SHARES	Class/Series	Par Value
<b>1,000 NO PAR VALUE</b>		

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

ISSUED SHARES	Class/Series	Par Value
<b>200</b>	<b>Common</b>	<b>No par</b>

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



File Date: 3-4-03  
Check No.: 13875  
By: [Signature]

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: [Signature] Date: 2/26/03  
**Raul Martinez, Jr.**  
Print or Type Name of Officer



**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002**

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **43398**  
2. Name of Corporation **Martinez and German Liquors, Inc.**  
3. Street Address Principal Business Office  
**310-314 Cranston Street**  
4. Business Phone No. **(401) 751-7752**  
5. State of Incorporation **RHODE ISLAND**  
7. Brief Description of the Character of Business Conducted in Rhode Island

City **Providence** State **RI** Zip **02907**  
6. SIC Code **8888**

Selling alcoholic and non-alcoholic beverages and related food items.

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

President Name  
**Raul Martinez, Jr.**  
Street Address  
**331 Dexter Street**  
City **Providence** State **RI** Zip **02907**

Vice President Name  
**Raul Martinez, Jr.**  
Street Address  
**331 Dexter Street**  
City **Providence** State **RI** Zip **02907**

Secretary Name  
**Jacqueline Martinez**  
Street Address  
**331 Dexter Street**  
City **Providence** State **RI** Zip **02907**

Treasurer Name  
**Raul Martinez, Jr.**  
Street Address  
**331 Dexter Street**  
City **Providence** State **RI** Zip **02907**

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

Director Name  
**Raul Martinez, Jr.**  
Street Address  
**331 Dexter Street**  
City **Providence** State **RI** Zip **02907**

Director Name  
  
Street Address  
  
City   
 State   
 Zip

Street Address  
  
City   
 State   
 Zip

Street Address  
  
City   
 State   
 Zip

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

AUTHORIZED SHARES  
Number of Shares Class/Series Par Value  
**1,000 NO PAR VALUE**

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

ISSUED SHARES  
Number of Shares Class/Series Par Value  
**200 Common No par**

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



\* 4 3 3 9 8 \*

File Date: 3-1-02  
Check No.: 13244  
By: [Signature]

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 [Signature] Date 2/27/02

**Raul Martinez, Jr.**  
Print or Type Name of Officer

**President**  
Title of Officer



**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001**

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. <b>43398</b>		2. Name of Corporation <b>Martinez and German Liquors, Inc.</b>			
3. Street Address Principal Business Office <b>310-314 Cranston Street</b>			City <b>Providence</b>	State <b>RI</b>	Zip <b>02907</b>
4. Business Phone No. <b>(401) 751-7752</b>		5. State of Incorporation <b>Rhode Island</b>			6. SIC Code
7. Brief Description of the Character of Business Conducted in Rhode Island <b>Selling alcoholic and non-alcoholic beverages and related food items</b>					
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name <b>Raul Martinez, Jr.</b>			Vice President Name <b>Raul Martinez, Jr.</b>		
Street Address <b>331 Dexter Street</b>			Street Address <b>331 Dexter Street</b>		
City <b>Providence</b>	State <b>RI</b>	Zip <b>02907</b>	City <b>Providence</b>	State <b>RI</b>	Zip <b>02907</b>
Secretary Name <b>Jacqueline Martinez</b>			Treasurer Name <b>Raul Martinez, Jr.</b>		
Street Address <b>331 Dexter Street</b>			Street Address <b>331 Dexter Street</b>		
City <b>Providence</b>	State <b>RI</b>	Zip <b>02907</b>	City <b>Providence</b>	State <b>RI</b>	Zip <b>02907</b>
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name <b>Raul Martinez, Jr.</b>			Director Name		
Street Address <b>331 Dexter Street</b>			Street Address		
City <b>Providence</b>	State <b>RI</b>	Zip <b>02907</b>	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT) <input type="checkbox"/>					
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
<b>1,000 Shares</b>		<b>No Par</b>	<b>200</b>	<b>Common</b>	<b>Without</b>
11. SHARES ISSUED (*X* BOX FOR ATTACHMENT) <input type="checkbox"/>					

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

File Date: 4-6-01

Check No.: 12641

By: [Signature]

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer: [Signature] Date: 3/30/01

Print or Type Name of Officer: **RAUL MARTINEZ, JR.**

Title of Officer: **President**



**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000**  
Filing Period: January 1-March 1 • Filing Fee: \$50.00



(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 43398 2. Name of Corporation Martinez and German Liquors, Inc.

3. Street Address Principal Business Office 310-314 Cranston Street Providence RI 02907  
4. Business Phone No. (401) 751-7752 5. State of Incorporation RHODE ISLAND  
6. SIC Code

7. Brief Description of the Character of Business Conducted in Rhode Island  
Selling alcoholic and non-alcoholic beverages and related food items

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

President Name Raul Martinez, Jr. Street Address 331 Dexter Street City Providence State RI Zip 02907	Vice President Name Raul Martinez, Jr. Street Address 331 Dexter Street City Providence State RI Zip 02907
Secretary Name Jacqueline Martinez Street Address 331 Dexter Street City Providence State RI Zip 02907	Treasurer Name Raul Martinez, Jr. Street Address 331 Dexter Street City Providence State RI Zip 02907

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

Director Name Raul Martinez, Jr. Street Address 331 Dexter Street City Providence State RI Zip 02907	Director Name  Street Address  City State Zip
Director Name  Street Address  City State Zip	Director Name  Street Address  City State Zip

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

AUTHORIZED SHARES	Class/Series	Par Value
Number of Shares		
1,000 SHS NO PAR		

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

ISSUED SHARES	Class/Series	Par Value
Number of Shares		
200	Common	Without

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



\* 4 3 3 9 8 \*

File Date: 8-8-00  
Check No.: 12156  
By: BMF

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: [Signature] Date: 8/05/00  
Print or Type Name of Officer: RAUL MARTINEZ, JR.  
Title of Officer: President



**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1999**

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. <b>43398</b>		2. Name of Corporation <b>Martinez and German Liquors, Inc.</b>	
3. Street Address Principal Business Office <b>310-314 Cranston Street</b>		City <b>Providence</b>	State <b>RI</b>
4. Business Phone No. <b>(401) 751-7752</b>		5. State of Incorporation <b>RHODE ISLAND</b>	
7. Brief Description of the Character of Business Conducted in Rhode Island <b>Selling alcoholic and non-alcoholic beverages and related food items</b>		6. SIC Code <b>0000</b>	

  

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) • FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name		Vice President Name	
<b>Raul Martinez, Jr.</b>		<b>Raul Martinez, Jr.</b>	
Street Address		Street Address	
<b>331 Dexter Street</b>		<b>331 Dexter Street</b>	
City	State	City	State
<b>Providence</b>	<b>RI</b>	<b>Providence</b>	<b>RI</b>
Zip		Zip	
<b>02907</b>		<b>02907</b>	
Secretary Name		Treasurer Name	
<b>Jacqueline Martinez</b>		<b>Raul Martinez, Jr.</b>	
Street Address		Street Address	
<b>331 Dexter Street</b>		<b>331 Dexter Street</b>	
City	State	City	State
<b>Providence</b>	<b>RI</b>	<b>Providence</b>	<b>RI</b>
Zip		Zip	
<b>02907</b>		<b>02907</b>	

  

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) • FILL IN SPACES BEFORE USING ATTACHMENTS			
Director Name		Director Name	
<b>Raul Martinez, Jr.</b>			
Street Address		Street Address	
<b>331 Dexter Street</b>			
City	State	City	State
<b>Providence</b>	<b>RI</b>		
Zip		Zip	
<b>02907</b>			

  

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)			11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
<b>1,000 SHS NO PAR</b>			<b>200</b>	<b>Common</b>	<b>Without</b>

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



\* 4 3 3 9 8 \*

File Date: 7-15-99  
Check No.: 11288  
By: AMF

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: \_\_\_\_\_  
Print or Type Name of Officer: RAUL MARTINEZ, JR.  
Title of Officer: President

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



(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **43398** 2. Name of Corporation **Martinez and German Liquors, Inc.**  
3. Street Address Principal Business Office **310-314 Cranston Street** City **Providence** State **RI** Zip **02907**  
4. Business Phone No. **(401) 751-7752** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code

7. Brief Description of the Character of Business Conducted in Rhode Island  
**Selling alcoholic and non-alcoholic beverages and related food items**

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

President Name <b>Raul Martinez, Jr.</b>	Vice President Name <b>Raul Martinez, Jr.</b>
Street Address <b>331 Dexter Street</b>	Street Address <b>331 Dexter Street</b>
City State Zip <b>Providence RI 02907</b>	City State Zip <b>Providence RI 02907</b>
Secretary Name <b>Jacqueline Martinez</b>	Treasurer Name <b>Raul Martinez, Jr.</b>
Street Address <b>331 Dexter Street</b>	Street Address <b>331 Dexter Street</b>
City State Zip <b>Providence RI 02907</b>	City State Zip <b>Providence RI 02907</b>

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

Director Name <b>Raul Martinez, Jr.</b>	Director Name
Street Address <b>331 Dexter Street</b>	Street Address
City State Zip <b>Providence RI 02907</b>	City State Zip
Director Name	Director Name
Street Address	Street Address
City State Zip	City State Zip

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

AUTHORIZED SHARES	Class/Series	Par Value
<b>1,000 SHS NO PAR</b>		

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

ISSUED SHARES	Class/Series	Par Value
<b>200</b>	<b>Common</b>	<b>Without</b>

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



File Date: 6-8-98  
Check No.: 10254  
By: 100

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 hereon are true and correct.

Signature of Officer: [Signature] Date: 6-02-98  
**RAUL MARTINEZ, JR.**  
Print or Type Name of Officer  
President  
Title of Officer



**PROFIT CORPORATION ANNUAL REPORT 1997**

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **43398** 2. Name of Corporation **Martinez and German Liquors, Inc.**  
 3. Street Address Principal Business Office **310-314 Cranston Street** City **Providence** State **RI** Zip **02907**  
 4. Business Phone No. **(401) 751-7752** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code

7. Brief Description of the Character of Business Conducted in Rhode Island  
**Selling alcoholic and non-alcoholic beverages and related food items.**

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

President Name <b>Raul Martinez, Jr.</b> Street Address <b>331 Dexter Street</b> City <b>Providence</b> State <b>RI</b> Zip <b>20907</b>	Vice President Name <b>Raul Martinez, Jr.</b> Street Address <b>331 Dexter Street</b> City <b>Providence</b> State <b>RI</b> Zip <b>02907</b>
Secretary Name <b>Jacqueline Martinez</b> Street Address <b>331 Dexter Street</b> City <b>Providence</b> State <b>RI</b> Zip <b>02907</b>	Treasurer Name <b>Raul Martinez, Jr.</b> Street Address <b>331 Dexter Street</b> City <b>Providence</b> State <b>RI</b> Zip <b>02907</b>

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

Director Name <b>Raul Martinez, Jr.</b> Street Address <b>331 Dexter Street</b> City <b>Providence</b> State <b>RI</b> Zip <b>02907</b>	Director Name  Street Address  City State Zip
Director Name  Street Address  City State Zip	Director Name  Street Address  City State Zip

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

AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
<b>1,000 SHS NO PAR</b>			<b>200</b>	<b>Common</b>	<b>Without</b>

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



\* 4 3 3 9 8 \*

File Date: 2-10-97  
 Check No.: 8583  
 By: ICP

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 [Signature] Date 2/7/97  
 Print or Type Name of Officer RAUL MARTINEZ, JR.  
 Title of Officer President

**PROFIT CORPORATON  
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

PLEASE TYPE OR PRINT IN BLACK INK.

1. CORPORATE ID NO. 43398		2. NAME OF CORPORATION MARTINEZ AND GERMAN LIQUORS, INC.	
3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE 310-314 Cranston Street		CITY Providence	STATE RI
		ZIP CODE 02907	
4. BUSINESS PHONE NO. (401) 751-7752	5. STATE OF INCORPORATION RHODE ISLAND		6. SIC CODE 2088

7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND  
Selling alcoholic and non-alcoholic beverages and related food items.

8. NAMES AND ADDRESSES OF THE OFFICERS			
PRESIDENT NAME Raul Martinez, Jr.		VICE PRESIDENT NAME Raul Martinez, Jr.	
STREET ADDRESS 331 Dexter Street		STREET ADDRESS 331 Dexter Street	
CITY Providence	STATE RI	ZIP CODE 02907	CITY Providence
			STATE RI
			ZIP CODE 02907
SECRETARY NAME Jacqueline Martinez		TREASURER NAME Raul Martinez, Jr.	
STREET ADDRESS 331 Dexter Street		STREET ADDRESS 331 Dexter Street	
CITY Providence	STATE RI	ZIP CODE 02907	CITY Providence
			STATE RI
			ZIP CODE 02907

9. NAMES AND ADDRESSES OF THE DIRECTORS			
DIRECTOR NAME Raul Martinez, Jr.		DIRECTOR NAME	
STREET ADDRESS 331 Dexter Street		STREET ADDRESS	
CITY Providence	STATE RI	ZIP CODE 02907	CITY
			STATE
			ZIP CODE
DIRECTOR NAME		DIRECTOR NAME	
STREET ADDRESS		STREET ADDRESS	
CITY	STATE	ZIP CODE	CITY
			STATE
			ZIP CODE

10. SHARES AUTHORIZED AND ISSUED				
AUTHORIZED SHARES			ISSUED SHARES	
NUMBER OF SHARES	CLASS / SERIES	PAR VALUE	NUMBER OF SHARES	PAR VALUE
1,000 SHS	NO PAR		200	Without

This report must be **SIGNED IN INK** by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

File Date: 4-3-96  
Check No: 7529  
By: *CS/UP*  
For Secretary of State Use Only

*[Signature]*  
Signature of Officer  
RAUL MARTINEZ, JR.  
Print or Type Name of Officer  
President  
Title of Officer  
4-02-96  
Date

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.**

Corporate ID: 0043392 Annual Report for the year: 1995

Name of Corporation: Martinez and German Liquors, Inc.

Business entity organized under the laws of the State of: Rhode Island

For foreign entity, address and telephone number of principal office:

Business Entity is (check one):  
 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:  
Selling alcoholic and non-alcoholic beverages and related food items.

Phone: ( )  
 Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):  
310-214 Cranston Street  
Providence, RI 02907  
 Phone: ( 401 ) 751-7752

**THE NAMES OF THE OFFICERS ARE:**

OFFICER	STREET ADDRESS	CITY/STATE	ZIP CODE
PRESIDENT	Raul Martinez, Jr., 331 Dexter Street, Providence, RI	02907	
VICE PRESIDENT	Raul Martinez, Jr., 331 Dexter Street, Providence, RI	02907	
SECRETARY	Jacqueline Martinez, 331 Dexter Street, Providence, RI	02907	
TREASURER	Raul Martinez, Jr., 331 Dexter Street, Providence, RI	02907	

**THE NAMES OF THE DIRECTORS ARE:**

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
Raul Martinez, Jr.,	331 Dexter Street, Providence, RI	02907	
NAME:	STREET ADDRESS	CITY/STATE	ZIP CODE
NAME:	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 1000 Class / Series Common	Number of Shares 200 Class / Series Common
No Par Value	No Par Value

Date: 1995  
 By: Martinez and German Liquors, Inc.  
RAUL MARTINEZ, JR.  
 PRINT OR TYPE NAME OF OFFICER SIGNING  
President  
 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.

ADOLPH N. ANDERSON JR  
 155 SOUTH MAIN ST.  
 PROVIDENCE RI 02903

**FILED**  
 FEB 10 1995  
 By 6779

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  
401-277-3040

File Annually  
LLC: Sept. 1 - Nov. 1  
CORP: Jan. 1 - March 1

Corporate ID: 0043398 Annual Report for the year: 1994

Name of Business Entity: Martinez and German Liquors, Inc.

Business entity organized under the laws of the State of Rhode Island

Federal Taxpayer Identification Number: [REDACTED]

For foreign entity, address and telephone number of principal office:

Phone: ( )

Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):

310-214 Cranston Street  
Providence, RI 02907

Phone: (401) 751-7752

Business Entity is (check one):

- Business Corporation (See RIGL Chapter 7-1.1)
- Professional Service Corporation (See RIGL Chapter 7-5.1)
- Limited Liability Company (See RIGL 7-16)

Name, title and mailing address of contact person to whom communications may be directed

Raul Martinez, Jr., President  
331 Dexter Street  
Providence, RI 02907

Brief statement of the character of business conducted in Rhode Island:  
Selling alcoholic and non-alcoholic  
beverages and related food items.

Date of Organization: 6/17/87

Date of Qualification to do business in Rhode Island (if foreign entity)

THE NAMES OF THE OFFICERS ARE:

<input type="checkbox"/> CHIEF EXECUTIVE OFFICER OR <input checked="" type="checkbox"/> PRESIDENT (if applicable)	STREET ADDRESS	CITY/STATE	ZIP CODE
Raul Martinez, Jr.,	331 Dexter Street, Providence, RI	02907	
<input type="checkbox"/> CHIEF FINANCIAL OFFICER OR <input checked="" type="checkbox"/> VICE PRESIDENT (if applicable)	STREET ADDRESS	CITY/STATE	ZIP CODE
Raul Martinez, Jr.,	331 Dexter Street, Providence, RI	02907	
<input type="checkbox"/> CONTROLLER OR RECORDS OFFICER <input checked="" type="checkbox"/> SECRETARY (if applicable)	STREET ADDRESS	CITY/STATE	ZIP CODE
Jacqueline Martinez,	331 Dexter Street, Providence, RI	02907	
<input type="checkbox"/> CHIEF FINANCIAL OFFICER OR <input checked="" type="checkbox"/> TREASURER (if applicable)	STREET ADDRESS	CITY/STATE	ZIP CODE
Raul Martinez, Jr.,	331 Dexter Street, Providence, RI	02907	

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
Raul Martinez, Jr.,	331 Dexter Street, Providence, RI	02907	
NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
NAME	STREET ADDRESS	CITY/STATE	ZIP CODE

NUMBER OF SHARES AUTHORIZED (if Applicable)	
NUMBER	1000
CLASS	Common
SERIES	
PAR VALUE OR WITHOUT PAR	No Par Value

NUMBER OF SHARES ISSUED AND OUTSTANDING (if Applicable)	
NUMBER	200
CLASS	Common
SERIES	
PAR VALUE OR WITHOUT PAR	No Par Value

Date March 24 1994

Martinez and German Liquors, Inc.  
By: [Signature]  
RAUL MARTINEZ, JR.  
PRESIDENT  
TITLE OF OFFICER SIGNING

Form 31 1994

DESIGNATED REGISTERED OR RESIDENT AGENT FOR SERVICE OF PROCESS:

PLEASE NOTE: If the Corporation has changed its registered office and/or registered or resident agent, Form 9 or Form LLC 3 must be filed.

ADOLPH N. ANDERSON, JR.  
155 SOUTH MAIN STREET  
PROVIDENCE RI 02908

FILED  
MAR 24 1994  
Mesa 6822



Filing Fee \$50.00

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

02/03

Corporate ID 0013392 Annual Report for the year 1992

FIRST: The name of the corporation is Martinez and German Liquors, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is Selling alcoholic and non-alcoholic beverages and related food items.

FOURTH: If foreign corporation, address of its principal office.....

FIFTH: Business address in Rhode Island 310-314 Cranston Street, Providence,  
Rhode Island 02907

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
Raul Martinez, Jr.	Director	331 Dexter Street, Providence, RI 02907
	Director	
	Director	
Raul Martinez, Jr.	President	331 Dexter Street, Providence, RI 02907
Raul Martinez, Jr.	Vice President	331 Dexter Street, Providence, RI 02907
Jacqueline Martinez	Secretary	331 Dexter Street, Providence, RI 02907
Raul Martinez, Jr.	Treasurer	331 Dexter Street, Providence, RI 02907

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
1000	Common		No Par Value

PAID

APR 30 1992

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
200	Common		No Par Value

SECY OF STATE

Dated February 12 19 92

Martinez and German Liquors, Inc.  
(Name of Corporation)

By RAUL MARTINEZ, JR.  
Title President

(Report must be signed by an officer)

# State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION  
100 NORTH MAIN STREET  
PROVIDENCE, RHODE ISLAND 02903

02903

Corporate ID 0043398 Annual Report for the year 1991

FIRST: The name of the corporation is Martinez and German Liquors, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is Selling alcoholic & non-alcoholic beverages and related food items.

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 310-314 Cranston street, Providence, Rhode Island 02907

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
<u>Paul Martinez, Jr</u>	<u>Director</u>	<u>331 Dexter st, Providence, RI</u>
	<u>Director</u>	
	<u>Director</u>	
<u>Paul Martinez Jr</u>	<u>President</u>	<u>331 Dexter st. Providence, R.I. 02907</u>
<u>Paul Martinez Jr</u>	<u>Vice President</u>	<u>331 Dexter st. Prov. R.I. 02907</u>
<u>Jacqueline Martinez</u>	<u>Secretary</u>	<u>331 Dexter st. Prov. R.I. 02907</u>
<u>Paul Martinez, Jr</u>	<u>Treasurer</u>	<u>331 Dexter st. Prov. R.I. 02907</u>

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
<u>1000</u>	<u>Common</u>	<u>PAID</u>	<u>No Par Value</u>

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
<u>200</u>	<u>Common</u>	<u>SECY OF STATE</u>	<u>No Par Value</u>

Dated April 29 1992

(Name of Corporation)  
By Paul Martinez Jr  
Title President

(Report must be signed by an officer)

Filing Fee \$15.00

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 0043335 Annual Report for the year 1990

FIRST: The name of the corporation is Martinez and German Liquors, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is Selling alcoholic and non-alcoholic beverages and related food items.

FOURTH: If foreign corporation, address of its principal office.....

FIFTH: Business address in Rhode Island 310-314 Cranston Street, Providence,  
Rhode Island 02907

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
Raul Martinez, Jr.	Director	145 Bellevue Avenue, Providence, RI 0290
	Director	
	Director	
Raul Martinez, Jr.	President	145 Bellevue Avenue, Providence, RI 02907
	Vice President	
Jacqueline Martinez	Secretary	331 Dexter Street, Providence, RI 02907
Raul Martinez, Jr.	Treasurer	145 Bellevue Avenue, Providence, RI 02907

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
1000	Common		No Par Value

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
200	Common		No Par Value

Dated July 24, 19 90

MARTINEZ AND GERMAN LIQUORS, INC.

(Name of Corporation)

By [Signature]

Title President

(Report must be signed by an officer)

**PAID**  
JUL 25 1990  
SECY. OF STATE  
No Par Value

# State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION  
270 WESTMINSTER MALL  
PROVIDENCE, RHODE ISLAND 02903

*GM*

Corporate ID 43398 Annual Report for the year 1989

FIRST: The name of the corporation is MARTINEZ AND GERMAN LIQUORS, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is Selling alcoholic and non-achoholic beverages and related food items.

FOURTH: If foreign corporation, address of its principal office.....

FIFTH: Business address in Rhode Island 310-314 Cranston Street, Providence,  
Rhode Island 02907

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
<u>Raul Martinez, Jr.</u>	<u>Director</u>	<u>145 Bellevue Avenue, Providence, RI 029</u>
.....	<u>Director</u>	.....
.....	<u>Director</u>	.....
<u>Raul Martinez, Jr.</u>	<u>President</u>	<u>145 Bellevue Avenue, Providence, RI 029</u>
.....	<u>Vice President</u>	.....
<u>Raul Martinez, Jr.</u>	<u>Secretary</u>	<u>145 Bellevue Avenue, Providence, RI 029</u>
<u>Raul Martinez, Jr.</u>	<u>Treasurer</u>	<u>145 Bellevue Avenue, Providence, RI 029</u>

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
<u>1000</u>	<u>Common</u>		<u>No Par Value</u>

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
<u>200</u>	<u>Common</u>		<u>No Par Value</u>

**MAR 02 1989**  
CORPORATION DIVISION

Dated February 19 89

MARTINEZ AND GERMAN, INC.  
(Name of Corporation)

By *Raul Martinez*

Title President

(Report must be signed by an officer)

# State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION  
270 WESTMINSTER MALL  
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 43398 Annual Report for the year 1988

FIRST: The name of the corporation is Martinez and German Liquors, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is Selling alcoholic and non-alcoholic beverages and related food items.

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 310-314 Cranston Street, Providence, Rhode Island

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
Raul Martinez, Jr.	Director	145 Bellevue Avenue, Providence, RI 02907
	Director	
	Director	
Raul Martinez, Jr.	President	145 Bellevue Avenue, Providence, RI 02907
	Vice President	
Raul Martinez, Jr.	Secretary	145 Bellevue Avenue, Providence, RI 02907
Raul Martinez, Jr.	Treasurer	145 Bellevue Avenue, Providence, RI 02907

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
1000	Common		No Par

*Handwritten mark resembling 'A' or 'R'.*

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
200	Common		No Par

**PAID**

MAY 3 1988  
Series

**SECY. OF STATE**

Dated April 25th 19 88

Martinez and German Liquors, Inc.  
(Name of Corporation)  
By [Signature]  
Title President

(Report must be signed by an officer)