



State of Rhode Island  
Department of State - Business Services Division

**FILED**

FEB 10 2021

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Annual Report for the year: 2021  
Corporation \_\_\_\_\_

99 27220

- Filing period: January 1 - March 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by April 1.

1. Entity ID Number 120527		2. Exact name of the Corporation PANE e VINO, INC.			
3. Principal Office Address 365 ATWELLS AVENUE		City PROVIDENCE		State RI	Zip 02903
4. NAICS Code 722511		6. Brief description of the character of business conducted in Rhode Island THE PREPARATION, SALE AND SERVICE OF FINE ITALIAN FOOD AS WELL AS ALCOHOLIC BEVERAGES IN CONJUNCTION WITH THE OPERATION OF A FINE RESTAURANT.			
5. State of Incorporation RHODE ISLAND					
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name JOSEPH DEQUATTRO			Vice-President Name JOSEPH DEQUATTRO		
Street Address 365 ATWELLS AVENUE			Street Address 365 ATWELLS AVENUE		
City PROVIDENCE		State RI	Zip 02903	City PROVIDENCE	
				State RI	
				Zip 02903	
Secretary Name JOSEPH DEQUATTRO			Treasurer Name JOSEPH DEQUATTRO		
Street Address 365 ATWELLS AVENUE			Street Address 365 ATWELLS AVENUE		
City PROVIDENCE		State RI	Zip 02903	City PROVIDENCE	
				State RI	
				Zip 02903	
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name			Director Name		
Street Address			Street Address		
City		State	Zip	City	
				State	
				Zip	
Director Name			Director Name		
Street Address			Street Address		
City		State	Zip	City	
				State	
				Zip	
9. Shares Authorized					
10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
This information is currently of record in the Department of State.  Changes require an additional filing.		NUMBER OF SHARES	CLASS/SERIES		PAR VALUE
		100	COMMON		NONE
11. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee. <b>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.</b>					
Name of Authorized Representative JOSEPH DEQUATTRO				Date 2-3-2021	
Signature of Authorized Representative <i>Joseph Dequattro</i>					

MAIL TO:  
Division of Business Services  
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