FILED

MAY 04 2022

BY

State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2022

Corporation

→ Filing period: February 1 - May 1
→ Filing Fee: $50.00
→ Penalty: Additional $25.00 fee if form is not filed by May 31.

1. Entity ID Number	2. Exact name of the Corporation			
788649	Two Gringos, Inc.			
3. Principal Office Address		City	State	Zip
569 Main Street		Warren	RI	02855
4. NAICS Code	6. Brief description of the character of business conducted in Rhode Island			
722511	To engage in the manufacture and wholesale marketing of Mexican food.			
5. State of Incorporation				
RI				

7. List ALL officers (names and addresses) — Check the box to indicate an attachment ☐

President Name	Street Address	City	State	Zip
Richard O. Reavis	7 Pokanoket Trial	Warren	RI	02855

Vice-President Name	Street Address	City	State	Zip
Vince A. Arcello	17 Meadow Lane	Bristol	RI	02809

Secretary Name	Street Address	City	State	Zip

Treasurer Name	Street Address	City	State	Zip

8. List ALL directors (names and addresses) — Check the box to indicate an attachment ☐

Director Name	Street Address	City	State	Zip
Richard O. Reavis	Same as above			

Director Name	Street Address	City	State	Zip
Vince A. Arcello	Same as above			

Director Name	Street Address	City	State	Zip

Director Name	Street Address	City	State	Zip

9. Shares Authorized

This information is currently of record in the Department of State.

Changes require an additional filing.

10. Shares Issued — Check the box to indicate an attachment ☐

NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
1,000	Common	No Par Value

11. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

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

Name of Authorized Representative	Date
Richard O. Reavis	4/30/2022

Signature of Authorized Representative: Richard O Reavis

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

FORM 630 - Revised: 11/2021