



State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2023
Corporation

FILED
STAMP
 JAN 19 2023
 BY *[Signature]*

- 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 116381		2. Exact name of the Corporation NEWPORT CEDAR DONUTS, INC.			
3. Principal Office Address 105 Cedar Street			City Pawtucket	State RI	Zip 02860-0000
4. NAICS Code 722513		6. Brief description of the character of business conducted in Rhode Island to operate a donut franchise			
5. State of Incorporation RI					
7. List ALL officers (names and addresses)					Check the box to indicate an attachment <input type="checkbox"/>
President Name Fernando J. Vieira			Vice-President Name Fernando J. Vieira		
Street Address 7 West Butterfly Way			Street Address 7 West Butterfly Way		
City Lincoln	State RI	Zip 02865-	City Lincoln	State RI	Zip 02865-
Secretary Name Fernando J. Vieira			Treasurer Name Fernando J. Vieira		
Street Address 7 West Butterfly Way			Street Address 7 West Butterfly Way		
City Lincoln	State RI	Zip 02865-	City Lincoln	State RI	Zip 02865-
8. List ALL directors (names and addresses)					Check the box to indicate an attachment <input type="checkbox"/>
Director Name Fernando J. Vieira			Director Name none		
Street Address 7 West Butterfly Way			Street Address none		
City Lincoln	State RI	Zip 02865-	City none	State none	Zip none
Director Name none			Director Name none		
Street Address none			Street Address none		
City none	State none	Zip none	City none	State none	Zip none
9. Shares Authorized		10. Shares Issued			
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	No Par
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 Fernando J. Vieira				Date January 2, 2023	
Signature of Authorized Representative <i>[Signature]</i>					

MAIL TO:
 Division of Business Services
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