



State of Rhode Island

## Department of State - Business Services Division

Annual Report for the year: **2023**

## Corporation

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

FILED

JAN 20 2023

BY

1. Entity ID Number <b>11106</b>		2. Exact name of the Corporation <b>TOTRAMA SUPERMARKETS, INC.</b>												
3. Principal Office Address <b>25 Village Plaza Way</b>			City <b>North Scituate</b>	State <b>RI</b>	Zip <b>02857-0000</b>									
4. NAICS Code <b>445110</b>		6. Brief description of the character of business conducted in Rhode Island to operate a supermarket business												
5. State of Incorporation <b>RI</b>														
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>														
President Name <b>Mark G. Brigido</b>			Vice-President Name <b>none</b>											
Street Address <b>35 Timberland Drive</b>			Street Address <b>none</b>											
City <b>Lincoln</b>	State <b>RI</b>	Zip <b>02865-</b>	City <b>none</b>	State <b>none</b>	Zip <b>none</b>									
Secretary Name <b>Mark G. Brigido</b>			Treasurer Name <b>Mark G. Brigido</b>											
Street Address <b>35 Timberland Drive</b>			Street Address <b>35 Timberland Drive</b>											
City <b>Lincoln</b>	State <b>RI</b>	Zip <b>02865-</b>	City <b>Lincoln</b>	State <b>RI</b>	Zip <b>02865-</b>									
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>														
Director Name <b>Mark G. Brigido</b>			Director Name <b>none</b>											
Street Address <b>35 Timberland Drive</b>			Street Address <b>none</b>											
City <b>Lincoln</b>	State <b>RI</b>	Zip <b>02865-</b>	City <b>none</b>	State <b>none</b>	Zip <b>none</b>									
Director Name <b>none</b>			Director Name <b>none</b>											
Street Address <b>none</b>			Street Address <b>none</b>											
City <b>none</b>	State <b>none</b>	Zip <b>none</b>	City <b>none</b>	State <b>none</b>	Zip <b>none</b>									
9. Shares Authorized														
This information is currently of record in the Department of State.  Changes require an additional filing.			10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>											
			<table border="1"> <thead> <tr> <th>NUMBER OF SHARES</th> <th>CLASS/SERIES</th> <th>PAR VALUE</th> </tr> </thead> <tbody> <tr> <td><b>100</b></td> <td><b>Common</b></td> <td><b>No Par</b></td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	<b>100</b>	<b>Common</b>	<b>No Par</b>			
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<b>100</b>	<b>Common</b>	<b>No Par</b>												
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 <b>Mark G. Brigido</b> <b>President</b>				Date <b>January 2, 2023</b>										
Signature of Authorized Representative 														

## MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

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Website: www.sos.ri.gov