



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.

RECEIVED
RI DEPT. OF STATE
BUSINESS SERVICES

2023 APR -7 A 10:06

1. Entity ID Number 47552		2. Exact name of the Corporation GARDEN HILLS FRUIT AND DELI, INC.			
3. Principal Office Address 763 Oaklawn Avenue		City Cranston		State RI	Zip 02920
4. NAICS Code 722513		6. Brief description of the character of business conducted in Rhode Island Delicatessen			
5. State of Incorporation RI					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Gregory C. Beaune			Vice-President Name Gregory C. Beaune		
Street Address 763 Oaklawn Avenue			Street Address 763 Oaklawn Avenue		
City Cranston		State RI	Zip 02920	City Cranston	
Secretary Name Gregory C. Beaune		Treasurer Name Gregory C. Beaune			
Street Address 763 Oaklawn Avenue			Street Address 763 Oaklawn Avenue		
City Cranston		State RI	Zip 02920	City Cranston	
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Gregory C. Beaune			Director Name		
Street Address 763 Oaklawn Avenue			Street Address		
City Cranston		State RI	Zip 02920	City	
Director Name			Director Name		
Street Address			Street Address		
City		State	Zip	City	
9. Shares Authorized 10. Shares Issued <input type="checkbox"/>					
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 Gregory C. Beaune				Date 3/30/23	
Signature of Authorized Representative <i>Gregory C. Beaune</i>					

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

FILED

APR 07 2023
BY ML 29223

FORM 630 - Revised: 2/2023