

# STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State

Matthew A. Brown, Secretary of State

Corporations Division 100 North Main Street Providence, RI 02903-1335 401.222.3040

<b>PROFIT CORPORATIO</b>	N/	ANNUAL REPORT FOR THE YEAR	2005
Filing Period: January 1 - March 1	•	Filing Fee: \$50.00	

(FORM MUST BE TYPED OR PRIN	TED IN BLACK)				
1. Corporate ID No. 80735	2. Name of Corporation  Joe's Meat Mark				<del> </del>
3. Street Address Principal Business C	<u> </u>		City	State	Zip
1339 Westmins	ter Street		Providence	R.I.	02909
4. Business Phone No. (401) 331-408		5. State of Incorporation RHODE ISLAND			6. SIC Code 3236
7. Brief Description of the Character of TO SELL MEAT PRODUC	of Business Conducted in F	Rhode Island			•
8. NAMES AND ADDRESSES President Name  JOSE T. Sous	OF THE OFFICERS:		CHMENT)	SPACES BEFORE USING	ATTACHMENTS
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City	State	Zip	City	State	Zφ
Seekonk Secretary Name	MA	02771	TYRisarer Name — -		
Street Address			Comment and desire		
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City	State	Ζφ	City	State	Ζίρ
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9. NAMES AND ADDRESSES Director Name	OF THE DIRECTOR	S: ("X" BOX FOR ATT	TACHMENT)   FILL IN Director Name	I SPÀCES BEFORE USIN	G ATTACHMENTS
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Director Name		1	Director Name		
Street Address			Street Address		·
City	State	Ζ.φ	City	State	Zφ
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time topoli most do m	gired in initial by chine	, mo i restacin, vice i	resident, occidenty, ressistar	n beeretary, measures, it	cccirc. or reduce
			Under penalty of peri	ury I declare and aftirm tha	t I have examined this report
File Date _ 2   28   0	<u> </u>			panying schedules and states	ments, and that all statement
Check No. 122			Signature of Officer	/ S	Date
Ву:		,	Pripror Type Name of	7 Special Officer	<u>C 01/14/05</u>
FOR SECRETARY OF STATE	TE USE ONLY		Title of Officer	e Vresi	alar



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State

Matthew A. Brown, Secretary of State

Corporations Division 100 North Main Street Providence, RI 02903-1335 401.222.3040

ROFIT	CORPORA	JION ANNU	JAL REPORT	FOR THE	YEAR	2004

Filing Period: January 1 - M (FORM MUST BE TYPED OR PRIN		Fce: \$50.00			
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3. Street Address Principal Business C		<u> </u>	City	State	Ζφ
1339 Westmins	ter Street		Providence	RI	02909
4. Business Phone No.		5. State of Incorporation			6. SIC Code
331,4081		RHODE ISLAND			3236
7. Brief Description of the Character of TO SELL MEAT PRODUC	of Business Conducted in R CTS AND SUPPLIES.	Phode Island			
8. NAMES AND ADDRESSES	OF THE OFFICERS:	("X" BOX FOR ATTA	CHMENT)   FILL II	N SPACES BEFORE USIN	G ATTACHMENTS
President Name			Vice President Name		
Jose T. Sousa					<del> </del>
Sired Address 6 Wagonwheel 1	Road		Street Address		
Seekonk	State MA	<sup>2φ</sup> 02771	City	State	Zip _
Secretary Name Jose T. Sousa	<b>*</b>	**************************************	Treasurer Name		······································
Street Address			Sircet Address	<del></del>	<del></del>
6 Wagonwheel 1					
<sup>City</sup> Seekonk	State MA	<sup>zφ</sup> 02771	Cuy	State	Zip
9. NAMES AND ADDRESSES	OF THE DIRECTOR	S: ("X" BOX FOR AT	TACHMENT) _   FILL	IN SPACES BEFORE USI	NG ATTACHMENTS
Jose T. Sousa			Director Name		
Sircei Address 6 Wagonwheel 1	Road		Street Address	<u> </u>	
City Seekonk	State MA	<sup>Zip</sup> 02771	City	State	Ζφ
Director Name	J	J	Director Name		
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This report must be s	igned in ink by eithe	r the President, Vice P	resident, Secretary, Assis		Receiver or Trustee  hat I have examined this repor
* 8	0735*	JAN 21 20	including any acco	ompanying schedules and stare true and correct.	tements, and that all statemen
Check No. 1239		By KMC	Signature of Officer		Date
Check No.	<del></del>		Jose T.		
Ву:			Print or Type Name	• •-	
FOR SECRETARY OF STA	TE USE ONLY		Presider Title of Officer	nt ————————————————————————————————————	
		,	Time of Officer		



Ву

FOR SECRETARY OF STATE USE ONLY

Matthew A. Brown, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401.222.3040

Form 630 12/01

FORM MUST BE TYPED	IN BLACK)				
1. Corporate ID No. ***********************************	2. Name of Corp.	ooration - D'S MEAT MARKET INCO	RPORATED		
3. Street Address Principal E	Business Office	,	City	State	Zip 02909
1339 WESTMINSTE	ER STREET	C. Co. v. a.C.L. and an artistic	PROVIDENCE	RI	6. SIC Code
4. Business Phone No. 4013314081		5. State of Incorporation RHODE ISLAND			3236
7. Brief Description of the C					
8. NAMES AND ADDR	resses of the of	FFICERS ("X" BOX FOR ATTA	ICHMENT)   FILL IN SP Vice President Name	PACES BEFORE USING AT	TTACHMENTS
Armando Nieves			Jose T. Sousa		
Street Address			Street Address		
1339 Westminste	r Street		1339 Westminste	er Street	
City	State	Zip	City	State	Zip
Providence	RI	02903	Providence	RI	02903
Secretary Name			Treasurer Name		
Jose T. Sousa	_		Armando Nieves		
Street Address			Sireei Address		
1339 Westminste	r Street		1339 Westminste	er Street	
City	State	Zip	City	State	Zip
Providence	RI	02903	Providence	RI	02903
9. NAMES AND ADDE Director Name	RESSES OF THE DI	IRECTORS ("X" BOX FOR AT	TACHMENT)	SPACES BEFORE USING	ATTACHMENTS
None					
Street Address		•	Street Address		
City	State	Zip	City .	State	Zip
Director Name			Director Name		
Street Address			Street Address		
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AUTHORIZED SHARES			ISSUED SHARES		
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This report must be si					
This report must be si					
This report must be si	0 7 3 5 +		Under penalty of pe	rjury, I declare and affirm	that I have examined dules and statements,
	0 7 3 5 *	<del></del> -	this report, including	erjury, I declare and affirm g any accompanying sche nts contained herein are th	dules and statements,
**80735* 2/3/032:2	_		this report, including	g any accompanying sche-	dules and statements,
**80735* 2/3/032:2	9:46 PM*		this report, including	g any accompanying sche-	dules and statements,
**80735* 2/3/032:2	_		this report, including	g any accompanying scheints contained herein are the	dules and statements,

President



Edward S. Inman, III, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

### PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002 Filing Period: January 1-March 1 • Filing Fee: \$50.00

Ferm 630 12/01

ce Street  Susiness Conducted in Rho  ts and suppl  OF THE OFFICER  Treet  State  RI	ies	Providence  MENT: FILLIN SPACES  Vice President Name  Jose T. Sousa  Street Address  1339 Westminste  City  Providence  Treasurer Name	• • • • • • • • • • • • • • • • • • •	. Zip
ce Street  Susiness Conducted in Rho  ts and suppl  OF THE OFFICER  Treet  State  RI	5. State of Incorporation RHODE ISLAND de Island 1 e s RS (*X * BOX FOR ATTACH	Providence  MENT FILLIN SPACES  Vice President Name  Jose T. Sousa  Street Address  1339 Westminste  City  Providence	RI  BEFORE USING ATTA  r Street    State	02903 6. SIC Code 3236 CHMENTS
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reet State RI	Zip	Vice President Name Jose T. Sousa Street Address 1339 Westminste City Providence	r Street	. Zip
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		Treasurer Name	TTT	, 02903
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		: Armando Nieves		
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State	Zip	City	State	Izip
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	RI OF THE DIRECTO  tate  tate  tate  tass/Series	RI 02903 OF THE DIRECTORS I'N' BOX FOR ATTAC	Treet    Italia	Street Address  1339 Westminster Street  RI

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. File Date: . Signature of Officer Date Check No .: . Armando Nieves Print or Type Name of Officer President FOR SECRETARY OF STATE USE ONLY **◆**> 3

Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

# PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001 Filing Period: January 1-March 1 • Filing Fee: \$50.00

3. Street Address Principal Business Office 3.3139 Westminster Street 4. Business Phone No. 401-331-4081 7. Brief Description of the Character of Business Co Sale of meat products ar 8. NAMES AND ADDRESSES OF TH President Name Armando Nieves Street Address 1339 Westminster Street City State Providence RI Becretary Name Jose T. Sousa Street Address 1339 Westminster Street Director Name None	S. State of Incorporation RHODE ISLA and supplies	ACHMENT) FILL IN SPACES  Vice President Name	State  RI  BEFORE USING ATTA	02903 6 <b>3236</b>
## August 1985   1985   1986	RHODE ISLA onducted in Rhode Island	Providence  ACHMENT) CFILL IN SPACES  Vice President Name	RI	02903
# Business Phone No.  401-331-4081  Prief Description of the Character of Business Co Sale of meat products at  NAMES AND ADDRESSES OF TH  President Name  Armando Nieves  itreet Address  1339 Westminster Street  Output  The State of the Character of Business Co Sale of meat products at  President Name  Armando Nieves  1339 Westminster Street  The State of the Character of Business Co RI  Providence RI  Providence RI  NAMES AND ADDRESSES OF THE  Prector Name  None	RHODE ISLA onducted in Rhode Island	ACHMENT) FILL IN SPACES  Vice President Name		
401-331-4081  Brief Description of the Character of Business Co Sale of meat products ar B. NAMES AND ADDRESSES OF TH  Bresident Name  Armando Nieves  treet Address  1339 Westminster Street  City State  Providence RI  Accretary Name  Jose T. Sousa  treet Address  1339 Westminster Street  Correctory Name  Jose T. Sousa  treet Address  1339 Westminster Street  City State  Providence RI  NAMES AND ADDRESSES OF THE  Director Name  None	RHODE ISLA onducted in Rhode Island	ACHMENT) FILL IN SPACES  Vice President Name	BEFORE USING ATTA	6 32 36° 
Brief Description of the Character of Business Co Sale of meat products ar NAMES AND ADDRESSES OF TH resident Name  Armando Nieves treet Address  1339 Westminster Street try  State  Providence RI ecretary Name  Jose T. Sousa treet Address  1339 Westminster Street erretary Name  Froudence RI ecretary Name  None	onducted in Rhode Island  nd supplies	ACHMENT) FILL IN SPACES  Vice President Name	BEFORE USING ATTA	
Sale of meat products ar  NAMES AND ADDRESSES OF TH resident Name  Armando Nieves treet Address  1339 Westminster Street try State  Providence RI ecretary Name  Jose T. Sousa treet Address  1339 Westminster Street ity State Providence RI . NAMES AND ADDRESSES OF THI rector Name NOne	nd supplies	Vice President Name	BEFORE USING ATTA	
NAMES AND ADDRESSES OF TH resident Name  Armando Nieves treet Address  1339 Westminster Street ity State  Providence RI recetary Name  Jose T. Sousa treet Address  1339 Westminster Street ity State  Providence RI NAMES AND ADDRESSES OF THE recetor Name None		Vice President Name	BEFORE USING ATTA	
Armando Nieves treet Address  1339 Westminster Street try  Providence  Jose T. Sousa treet Address  1339 Westminster Street try  State  Providence  RI  Street Address  1339 Westminster Street try  Providence  RI  NAMES AND ADDRESSES OF THE  RI  RECTOR Name  NOne	E OFFICERS (X* BOX FOR ATT	Vice President Name	BEFORE USING ATTAC	
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Providence RI  ceretary Name  Jose T. Sousa  treet Address  1339 Westminster Street  ity State  Providence RI  NAMES AND ADDRESSES OF THE  Director Name  NOne		Jose T. Sousa		
Providence RI  State  Providence RI  Jose T. Sousa  treet Address  1339 Westminster Street  Providence RI  NAMES AND ADDRESSES OF THE  Director Name  NOne		Street Address	_	
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treet Address  1339 Westminster Street  ity State Providence RI NAMES AND ADDRESSES OF THE Director Name NOne		Treasurer Name		
1339 Westminster Street  Providence RI  NAMES AND ADDRESSES OF THE  Director Name  NOne		Armando Nieves Street Address		
Providence RI P. NAMES AND ADDRESSES OF THE Director Name NOne		•		
Providence RI  NAMES AND ADDRESSES OF THE Director Name  NOne	Zip	1339 Westminster	ī	
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nis report must be signed in ink b	: Ab Ab D===+3==A	- Paraida - A C		<u> </u>

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Check No.: _	MAR 01 2001  By 62 3215/
Ву:	ARY OF STATE USE ONLY

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.

Simple of Officer		
Signature of Officer	Date	

Armando Nieves Print or Type Name of Officer

President

Title of Officer

Enmi 630 1280



James R. Langevin, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

# PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000

Filing Period: January 1-March 1 • Filing Fee: \$50.00

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TANIRE	HOX

80735	2. Name of Corpora	etion			<u></u>
	ARMANDO'S		RPORATED		
Street Address Principal Business (	Office	<del>-</del> · · ·	City	State	Zip
1339 Westminster	Street		Providence	RI	02002
Business Phone No.		5. State of Incorporation	110VIdence	KI	02903 6. SIC Code
(401) 331-4081		RHODE ISLAND			3236
Brief Description of the Character	of Business Conducted	in Rhode Island			
Sale of meat prod	ucts and su	pplies			
			MENT) FILL IN SPACES BEF	ORE USING ATTACHM	IENTS
resident Name			Vice President Name		•
Armando Nieves			Jose T. Sousa		
treet Address	`	· <del>-</del> · · · · · ·	Street Address		
1339 Westminster	Street		1339 Westminster	Street	
ity	State	Zip	City	State	Zip
Providence	RI	02903	Providence	RT	02903
cretary Name		·••••••••••••	Treasurer Name		
Jose T. Sousa			Armando Nieves		
treet Address		• • •	Street Address	•	
1339 Westminster	Street		1339 Westminster	Street	
ity	State	Zip	City	State	Zip
Providence	RI	02903	Providence	DΤ	. 02903
rector Name None eet Address			Director Name Street Address		
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irector Name		••••••	Director Name		• • • • • • • • • • • • • • • • • • • •
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File Date:

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Check No.:

By Ca 4054

By:

FOR SECRETARY OF STATE USE ONLY

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.

Alexando mine Signature of Officer	3/4/00	
Signature of Officer	Date	
Ammonda Ndiana		

Armando Nièves

Print or Type Name of Officer
President



James R. Langevin, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

# PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1999

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BL	ICK)							
1. Corporate ID No. <b>80735</b>	2. Name of Corporation ARMANDO'S	MEAT MARKET IN	CORPORATED		1			
3. Street Address Principal Business 1339 Westmin:			Providence	State RI	02903			
4. Business Phone No. 331-4081		5. State of Incorporation RHODE ISLAN						
7. Brief Description of the Characte  Sale of meat	•							
8. NAMÉS AND ADDRES President Name	SES OF THE OFFIC	ERS (*X* BOX FOR ATTAC	HMENT) FILL IN SPACES BE	FORE USING ATTACHN	MENTS : SE			
Armando Nieve	es		Jose T. Sousa					
1339 Westmins	ster Street		1339 Westmins	ter Street				
Providence,	State RI	02903	City Providence	State RI	02903			
Secretary Name	l <del></del>		Treasurer Name					
J.ose_TSous	1		Armando_Nieve	S				
1339 Westminster: Street  City Providence RI Zip 02903		1339 Westminster Street						
Providence			Providence,	State RI	02903			
9. NAMES AND ADDRES	SES OF THE DIREC	TORS ('X' BOX FOR ATI	AGHMENT) TILL IN SPACES TO Director Name	BEFORE USING ATTAC	HMENTS			
None			Director Hume					
Street Address			Street Address					
City	State	Zip	City	State	Zip			
Director Name			Director Name	······································				
Street Address	<del></del>	•	Street Address	<del>- · .ii - · · ·</del>	•			
City	State -	Zip	City	State	Zip			
10. SHARES AUTHORIZE	D (*X* BOX FOR ATTAC	HMFNT)	_11. SHARES ISSUED ('X'	BOX FOR ATTACHMENT!	1 A			
AUTHORIZED SHARES			ESTJED SHARES					
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value			
1,000 SHS COMM N	O PAR VAL		200	No Par Valu	e None			
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This report must be sign								

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FOR SECRETARY OF	STATE USE ONLY	<del>.                                     </del>

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.

<u> Armando Nieves</u> Print or Type Name of Officer

President Title of Officer



James R. Langevin, Secretary of State *∓*%.₫. Corporations Division 100 North Main Street Providence, RI 02903-1335 401-277-3040

(FORM MUST BE TYPED IN 1. Corporate ID No.	BLACK)  2. Name of Corpora	tion					
80735		'S MEAT MARKET INC	CORPORATED	•			
3. Street Address Principal Busin	ness Office	<del></del>	City	State	Zip		
_1339_Westmins	ster_Street_	5. State of Incorporation	$\perp$ Providence	RI	02903		
	PHODE ISI				6. SIC Code <b>3236</b>		
331-4081  7. Brief Description of the Chard	cter of Business Conducted i	in Rhode Island	<del></del>				
Sale of meat	products an	d_supplies			_		
8. NAMES AND ADDR		CERS (*X* BOX FOR ATTACE	IMENT)				
President Name Armando Nieve	\ C		Vice President Name Jose T. Sousa				
Street Address	<del> </del>	<del> </del>	Street Address				
1339 Westmins	ster Street	•	1339 Westmins	ter Street			
City	State	Zip	City	State	Zip		
Providence	RI	02903	Providence	RI	02903		
Secretary Name Jose T. Sousa	•		Treasurer Name Armando Nieve	Q			
Street Address		<del></del>	Street Address	<del></del>			
1339 Westmins	ster Street		1339 Westmins	ter Street			
City	State	Zip	City	State	Zip		
Providence	RI	02903	Providence	RI	02903		
9. NAMES AND ADDR Director Name	<u>esses of</u> the diri	CTORS CX BOX FOR ATTA	CHMENT) (				
			Director Name				
_None Street Address	<del></del>	<del></del>	Street Address				
City	State	Zip	City	State	Zip		
Mosto North			, , , , , , , , , , , , , , , , , , ,	,	• • • • • • • • • • • • • • • • • • • •		
Director Name			Director Name				
Street Address	<del> </del>		Street Address				
City	State	Zip	City	State	Zip		
10. SHARES AUTHORIZ	ZED ("X" BOX FOR ATT	ACHMENT)	11. SHARES ISSUED (*	X" BOX FOR AITACHMENT)	a		
ALTHORIZED SHARES			ISSUED SHARES				
Number of Shares	Class/Series	Par Volue	Number of Shares	Class/Series	Par Value		
1,000 SHS COMM NO PAR VAL			200	No Par Value	None		

	* 8 0 7 3 5 *
File Date:	2/13/98
Check No.:	3804
Ву:	1C10 /
FOR SECRETARY	OF STATE USE ONLY

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.

Armando Nieves Print or Type Name of Officer

President



James R. Langevin, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-277-3040

## PROFIT CORPORATION ANNUAL REPORT 1997

iling Period: January 1-March 1	•	Filling Fee: \$50.00	
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(FORM MUST BE TYPED	IN BLACK)	-			COMPLETING THIS TORM	
1. Corporate ID No.	2. Name of Corpor					
80735		'S MEAT MARKET	INCORPORATED			
3. Street Address Principal I	Business Office		City	State	Zip	
$_{-1339}$ Westmi	nster-Street	· <del></del>	Providence	RI	02903	
4. Business Phone No.		5. State of Incorpora			6. SIC Code	
331_4081	haracter of Business Conducted	RHODE ISL	AND		3236	
Sale of meat	products and su	pplies	· · · · · · · · · · · · · · · · · · ·			
O. NAMES AND AD	DRESSES OF THE OFF	TICERS CX BOX FOR AT	TACHMENT)  Vice President Name	<del></del>	<del> </del>	
Armando_Niev			<b>:</b>			
ATHIANUU_NTEV	es		Jose T. Sousa			
1339_Westmin	star Straat		1339 Westmins	tor Stroot		
City	State	Zip	: City	State	Zip	
Providence	RI	02903	Providence	RI	02903	
Secretary Name	······································		Treasurer Name			
Jose_TSous	a		Armando Nieve	s		
Street Address			Street Address	· <del></del>	····	
1339_Westmin	ster Street		1339 Westmins	ter Street		
City	State	Zip	City	State	Zip	
Providence	RI	02903	Providence	RI	02903	
	DRESSES OF THE DIR	ECTORS ("X" BOX FOR				
Director Name			Director Name			
Street Address				<del></del>	<del></del>	
Tireer Maniess			Street Address			
City	State	Zip	City	State	Zip	
,			<b>5</b> /	State	2.0	
Director Name			Director Name			
		•				
Street Address	······································		Street Address			
City	State	Zip	City	State	Zip	
10. SHARES AUTHO	RIZED AND ISSUED (	"X" BOX-FOR ATTACHMEN	(T) [			
AUTHORIZED SHARES			CSTUED SHARES			
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value	
1,000 SHS COM	M NO PAR VAL		200	No Par Value	none	
<del></del>			<u> </u>		<u> </u>	
This report must be	signed in ink by eitl	her the President, Vi	ce President, Secretary, As	sistant Secretary, Treasure	r, Receiver or Trustee	
			·			
	<b>                                    </b>					

	* 8 0 7 3 5 *
File Date:	1/16/97
Check No.:	1981
By:FOR SECRETAL	RY OF STATE USE ONLY

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.

ARMANDO NIEVES

## **PROFIT CORPORATION** ANNUAL REPORT

For Secretary of State Use Only

1996



# State of Rhode Island and Providence Plantations James R. Langevin, Secretary of State Corporations Division 100 North Main Street

Providence, Rhode Island 02903-1335 • (401) 277-3040

Filing Period: January 1-March 1

Filing Fee: \$50.00

PLEASE TYPE OR PRINT IN BLACK INK.

1. CORPORATE ID NO.	2. NAME OF CORPORATION						
80735	ARMANDO'S MEAT MARKET INCORPORATED						
3 STREET ADDRESS PRINCIPAL BUSINESS OFFIC	•	<del> · · · · · · · · · · · · · · · · · </del>	ĠTY	STATE	200 €		
1339 Westminster	Street		Providence	RI	02903		
4. BUSINESS PHONE HO.		5. STATE OF INCORPORATION RHODE IS	SLAND 5. SC CODE				
331-4081			13236				
7. BRIEF DESCRIPTION OF THE CHARACTER OF BU	SINESS COMOUCTED IN RHOOE ISL	NHD					
Sale of meat prod	<del></del>						
PRESIDENT NAME	8. HAM	ES AND ADDR	ESSES OF THE O	FFICERS			
Armando Nieves			Jose T. Sous	sa			
STREET ADORESS			STREET ADDRESS		··································		
1339 Westminster	Street	ZP COOE	1339 Westminste	er Street Tsiame	T 29 C006		
Providence	RI	02903	Providence	RI	02903		
SECRETARY NAME	<u> • • • • • • • • • • • • • • • • • • •</u>	······································	TREASURER HAME		, ,,,,,		
Jose T. Sousa	<del> </del>		Armando Niev	ves	<del></del>		
1339 Westminster	Street		1339 Westmin	nster Street			
Providence	SIATE	72€ 000€ 02903	άiγ	SIATE	∑P 000€		
trovidence			Providence	RI	02903		
DIRÈCTOR NAME	9. NAM	ES AND ADOR	ESSES OF THE D	IMECTORS			
STREET ADORESS		···	STREET ADDRESS		-		
(aty	I STATE	T 72P COOE	άπγ	I STATE	Z₽ C00€		
			1	, while			
DIRECTOR NAME		•	DIRECTOR NAME	•	•		
STREET ADORESS			STREET ADDRESS		· · · · · · · · · · · · · · · · · · ·		
			June 100 name		•		
arv	STATE	∑1P C00€	air	STATE	ZIP COD€		
	<u> </u>	<u> </u>	<u> </u>				
		ARES AUTHORI	ZED AND ISSUE				
HUMBER OF SHARES	AUTHORIZED SHARES CLASS / SERVES	PAR VALUE	HUMBER OF SHARES	ISSUED SHARES  CLASS / SERIES	PAR VALUE		
	MM NO PAR VAL						
1,000 303 001	III NO PAR VAL		200	No Par Value	porc		
			<u> </u>				
			NED IN INK by either t		<u></u>		
Presid	lent, Vice Presiden	nt, Secretary, Assista	ant Secretary, Treasure	er, Receiver or Trustee			
					irm that I have examined this		
· · · · · · · · · · · · · · · · · · ·	<del></del>	7.4	all statements	ng any accompanying sched contained herein are true an	ules and statements, and tha d correct.		
i /.	de A	ish .	XP -	moo receis			
File Date: 2/2_4	91.96 DX		Signature of O	fficer			
Check No:	763		Signature of Officer  X ARMANDO NIEVES				
			Print or Type Name of Officer				
By:	L		■ X X	esident	2/27/96		

State of Rhode Island and Providence Plantations
Office of The Secretary of State
100 North Main Street
Providence, Rhode Island 02903-1335
401-277-3040

### ANNUAL REPORT

Please Type or Print File Annually – Jan. 1 - March 1 Filing Fee \$50.00

Make Checks Payable to: Secretary of State

0080735 Corporate ID: Ar			Annus	1995					
	ARMANDO'S ME	AT MARKET					-		
Name of Corporation:			-			<del>-</del>		. <del>.</del>	
Business entity organized under the For foreign entity, address and tele				•	is (check one):	DICL (	71	7 1 1)	
- ·	phone number of principal of		t c		Corporation (See al Service Corpo				7-5-1)
			ι	] Trotession	ar service Corpo	Tauvii (	SCE K	ror, enapter	r•3.1)
			В	rief statement (	of the character	of busin	ess co	nducted in Rh	node Island:
T. ( )					meat pro				
Address and telephone of the princ	ipal office of business entity i	n Rhode		· · · · · · · · · · · · · · · · · · ·					
Island (Provide street address - No					*** * * * * * * * * * * * * * * * * * *		<b> -</b> .		
1339 Westminster Providence, RI 02	Street								
Phone: (401 ) 331-2191					· · · · · · · · · ·				
	THE	NAMES OF TH	HE OF	FICEDS AD	) F.				
PRESIDENT	THE	STREET ADD		TICERS AF	CITY/S1	ATE.			ZIP COD
ARMANDO NIEVES	1339	Westminst	ter	Street,	Provider	nce,	RI	02903	
VICE PRESIDENT		STREET ADD			CITY/S1				ZIP COD
JOSE T. SOUSA	1339	Westminst	ter	Street,	Provide	nce,	RI	02903	
SECRETARY		STREET ADD			CITY/S1				ZIP COD
JOSE T. SOUSA	1339	Westminst	ter	Street,	Provide	nce,	RI	02903	
TREASURER		STREET ADD			CITY/ST		<b>-</b> -	00000	NIE COD
ARMANDO NIEVES		Westminst				nce,	KI	02903	
NAME.	IHEN	AMES OF THE STREET ADD		ECTORS A	RE:	ATE			ZIP COD
		N/A							
NAME		STREET ADD	DRESS		CITY/ST	ATE			ZIP COD
NAME		STREET AUD	ORESS		CITY/ST	ATE		<del></del>	ZIP COD
NUMBER OF SHARES AUTHORIZ	ZED (Rider may be attached)		NUM	BER OF SHAR	ES ISSUED AND	OUTST	ANDI	NG (Rider may	be attached)
Number of Shares (	Class / Series		Num	ber of Shares	Clas	s / Serio	 es		
ne Thousand (1000)	Common Withou	ıt par	Tŵ	o Hundr	ed (200)			withou	t pår
1,,0000 (2010)		value		•					value
•									
									•
Date Journ 33m	. 1995	By:	110	nilo 1	Juin				
9	· · · <del>- · · · · ·</del>	ARM	ANDO	NIEVEŚ					
		PRINTOREY	<b>y</b> bre	OF OFFICER SIGN	ING				

DESIGNATED REGISTERED AGENT FOR SERVICE OF PROCESS:

PLEASE NOTE: If the registered office and/or registered agent indicated below is incorrect, Form 9 must be filed.

DANIEL A. CALNDA 171 BROADWAY PROVIDENCE

02<del>920</del> 02903

