



State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2013

Corporation

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

REC'D RIDOS
24 AUG 22 AM 11:24
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1. Entity ID Number 000153097		2. Exact name of the Corporation WILLETT AVENUE SUBWAY, INC.	
3. Principal Office Address 1086 WILLETT AVENUE UNIT 1		City RIVERSIDE	State RI
		Zip 02915	
4. NAICS Code 722513	6. Brief description of the character of business conducted in Rhode Island SALE OF SANDWICHES, CHIPS, AND SOFT DRINKS		
5. State of Incorporation RHODE ISLAND			
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
President Name MARY ANN BRAGA		Vice-President Name JOSEPH BRAGA	
Street Address 17 JUNIPER HILL DRIVE		Street Address 17 JUNIPER HILL DRIVE	
City COVENTRY	State RI	Zip 02816	City COVENTRY
			State RI
			Zip 02816
Secretary Name		Treasurer Name	
Street Address		Street Address	
City	State	Zip	City
			State
			Zip
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
Director Name		Director Name	
Street Address		Street Address	
City	State	Zip	City
			State
			Zip
Director Name		Director Name	
Street Address		Street Address	
City	State	Zip	City
			State
			Zip
9. Shares Authorized		10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>	
This information is currently of record in the Department of State. Changes require an additional filing.		NUMBER OF SHARES	
		CLASS/SERIES	
		8000	STK
			\$0.0100
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 <i>Kristen Braga</i>		Date 8/22/24	
Signature of Authorized Representative <i>Joseph Braga</i>		FILED	