



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2007

Filing Period: January 1 - March 1 • Filing Fee: \$50.00* THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK
* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 000013167		2. Name of Corporation UNITA PACKING, INC.			
3. Street Address Principal Business Office 41 Comstock Parkway			City Cranston	State RI	Zip 02921
4. Business Phone No. (401) 946-1400		5. State of Incorporation RHODE ISLAND			
6. Brief Description of the Character of Business Conducted in Rhode Island Buying, packaging and selling food stuff, condiments and spices.					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Frederick V. Vicario			Vice President Name Paul M. Vicario		
Street Address 41 Comstock Parkway			Street Address 41 Comstock Parkway		
City Cranston	State RI	Zip 02921	City Cranston	State RI	Zip 02921
Secretary Name Paul M. Vicario			Treasurer Name Frederick V. Vicario		
Street Address 41 Comstock Parkway			Street Address 41 Comstock Parkway		
City Cranston	State RI	Zip 02921	City Cranston	State RI	Zip 02921
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Frederick V. Vicario			Director Name		
Street Address 41 Comstock Parkway			Street Address		
City Cranston	State RI	Zip 02921	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
400 Common No Par Value			100	Common	No Par Value

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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.

Signature: [Signature] Date: 1-14-08
 Frederick V. Vicario
 Print or Type Name
 President
 Title

FILED

File Date: FEB 14 2008

Check No. 164

By: [Signature]

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