

	State of Rhode Island and Providence Plantations Office of the Secretary of State	Fee: \$50.00
	Corporations Division 148 W. River Street Providence, Rhode Island 02904-2615 Telephone: (401) 222-3040	 LOGOUT

**Business Corporation
Annual Report**

Filing Period: January 1 - March 1



Help with this form

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.

ANNUAL REPORT YEAR: 2009			
1. Corporate ID No. <u>000101600</u>			
2. Name of Corporation <u>JAKE'S BAR & GRILLE, INC.</u>			
3. Street Address Principal Business Office:			
No. and Street: <u>373 RICHMOND STREET</u>			
City or Town: <u>PROVIDENCE</u>	State: <u>RI</u>	Zip: <u>02903</u>	Country: <u>USA</u>
4. Business Phone No.			
<u>453-5253</u>			
5. State of Incorporation			
State: <u>RI</u>			
6. Brief Description of the Character of Business Conducted in Rhode Island			
THE PREPARATION AND SALE OF FOOD AND BEVERAGES, ALCOHOLIC AND NON-ALCOHOLIC, AND THE MAINTAINING OF A RESTAURANT BUSINESS.			
			FILED MAR 23 2009 By: <i>[Signature]</i> Ch.# <u>1781</u>
7. Names and Addresses of the Officers and Directors:			
All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete.			

2009 MAR 23 PM 1:25
 STATE OF RHODE ISLAND
 CORPORATIONS DIVISION

2009 MAR 23 PM 1:25

Delete	Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
<input type="checkbox"/>	PRESIDENT	JACQUELINE V NICHOLS	562 PLEASANT STREET PAWTUCKET, RI 02860- USA

Select From Below Title:

First Name: _____ Middle Name: _____ Last Name: _____ Suffix: _____
 Address: _____ City: _____ State: _____ Zip: _____ Country: _____

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares <i>Number of Shares</i>	Total Issued and Outstanding <i>Num of Shares</i>
CNP		\$0.00	1,000.00	500.00

9. 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.

Filer's Contact Information

(Enter a contact name, mailing address and email.)

Contact Name: Jacqueline V. Nichols

Business Name: Jake's Bar & Grille, Inc.

No. and Street: 373 Richmond Street - Same Address as -

City or Town: Providence State: RI Zip: 02903 Country: Prov

Contact Phone: 453-5253 ext:

Contact Email:

Please provide an email address to receive an expedited response from the Corporations Division if the filing is rejected for any reason. If no email address is provided, correspondence from the Division will be sent by mail.

Signed this 16 Day of March, 2009 at 10:23:05 AM. This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.

By *Jacqueline V. Nichols* as President
Signature of Authorized Representative of the Corporation

FILED

MAR 23 2009

By *MNC*
ID# 101600

Title

This report cannot be accepted for filing if an officer has executed the form and he/she is not listed in section 7.

By selecting ACCEPT you hereby acknowledge that this electronic document is submitted in compliance with R.I. Gen. Laws § 7-1.2. You hereby agree that any legal issues or causes of action arising from the submission of this

Accept

Decline

[Click HERE to Submit This Information](#)

Form No. 630
Revised 09/07

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Help

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MAR 23 2009

By MNC

101600