

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 2008

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.

7 1.2 1501(000)						
1. Corporate ID No. 35391		2. Name of Corporation LOBSTER POT REALTY, INC.				
3. Street Address Principal Business Office P.O. BOX 905			Gity BRISTOL	State RI	<sup>Zip</sup> 02809	
4. Business Phone No. 401-253-9100		5. State of Incorpor RHODE ISL		•		
6. Brief Description of the Charac LESSOR OF BUILDING	•	ed in Rhode Island				
7. NAMES AND ADDRESS	ES OF THE OFFIC	ERS: ("X" BOX FOR	ATTACHMENT)   FILL IN S	PACES BEFORE USING	ATTACHMENTS	
President Name			: Vice President Name			
R. JEFFREY HIRSH			•			
Street Address			Street Address			
43 BAGY WRINKLE C	OVE					
City	State	Ζip	City	State	Zip	
WARREN	RI	02885				
Secretary Name R. JEFFREY HIRSH			Treasurer Name RICHARD F. HIRSH			
Street Address			Street Address			
43 BAGY WRINKLE C	OVE		6 DRIFTWOOD DRIVE			
City	State	Zip	City	State	Zip	
WARREN	RI	02885	BARRINGTON	Ri	02806	
A siller home Siche on	ES OF THE DIREC	CTORS: ("X" BOX FO	R ATTACHMENT) [ FILL IN	SPACES BEFORE USING	ATTACHMENTS	
Director Name			Director Name RICHARD F. HIRSH			
R. JEFFREY HIRSH						
Street Address	O. /_		<b>;</b>	Street Address		
43 BAGY WRINKLE C	State	7:4	6 DRIFTWOOD DRI		124	
WARREN	RI	<i>Ζψ</i> <b>02885</b>	Gity BARRINGTON	State RI	Zip 00006	
Director Name	Jrsi	Juzoos	Director Name	[ K	02806	
Director Hume			Director Name			
Street Address			Street Address	Street Adduny		
Surces 2 June 633			Siree Address			
City	State	Zip	City	State	Zip	
•		1	•	[	-7	
9. SHARES AUTHORIZED	("X" BOX FOR A	TTACHMENT)	i 10. SHARES ISSUED	("X" BOX FOR ATTACH	  MENT  □	
AUTHORIZED SHARES	· · · · · · · · · · · · · · · · · · ·		1. W PAIGOT THAIRING HIND THE PLOT	TION MUST BE COMPLETED		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value	
1,000 COMM NO PAR VALUE			100	COMMON	NO PAR VALUE	
					LAR CTERTS	
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This report must be arrown	end on bobolf of the	a comparation by an and	horized representative. If the co	omoustion is in the best and	of a manifum on tree-t	
this report must be execut		_	<del>-</del>	orporation is in the hands	of a receiver of trustee	

Title

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File I	Date
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By:	Ву
	FOR SECRETARY OF STATE USE ONLY

including any accompanying schedule	I affirm that I have examined this report, is and statements, and that all statements
contained herein are true and correct.	121.08
Signature	Date
R. JEFFREY HIRSH	
Print or Type Name	
PRESIDENT	