



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 02901-2615
(401) 222-3000

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2009

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) shall be subject to a penalty fee of \$25.00.

1. Corporate ID No. 12855		2. Name of Corporation M.F. SOUSA + Sons Realty, INC.			
3. Street Address Principal Business Office 41 FORD LN.		City WARWICK	State RI	Zip 02888	
4. Business Phone No. 401-785-2210		5. State of Incorporation RI			
6. Brief Description of the Character of Business Conducted in Rhode Island					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name MANUEL F. SOUSA		Vice President Name JOHN M. SOUSA			
Street Address 41 THOMAS LN.		Street Address 41 THOMAS LN.			
City CRANSTON	State RI	Zip 02921	City CRANSTON	State RI	Zip 02921
Secretary Name MANUEL F. SOUSA		Treasurer Name MANUEL F. SOUSA			
Street Address SAME AS ABOVE		Street Address SAME AS ABOVE			
City	State	Zip	City	State	Zip
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
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 ("X" BOX FOR ATTACHMENT) ☐		
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet. 990 CLASS B 5000 COMM NO PAR VALUE			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
			Number of Shares	Class Series	Par Value
			1000	COMMON	NO PAR
			10 CLASS A	990 CLASS B	

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.

FILED	
File Date	FEB 19 2009
Check No.	
By	By 9464
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.

Signature _____ Date _____
MANUEL F. SOUSA
President