

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 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(e&d)) is

subject to a penalty fee of \$25.00.				me time preserved by and (10.7	(0.2.) 1.2 1901((Ca)) is	
1. Corporate ID No. 58386	2. Name of Corporation ISM Capital Corp	oration, Ltd.		AAA AMAA AMAA		
3. Street Address Principal Business Office 940 Waterman Avenue			City East Providence	State RI	<i>хъ</i> 02914	
4. Business Phone No. 5. State of Incorporation 401-435-7900 Rhode Island						
6. Brief Description of the Character of Business Conducted in Rhode Island Real Estate Holding Company						
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTAG President Name Gregory L. Lucini			CHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Vice President Name			
Street Address 940 Waterman Avenue			Street Address			
City East Providence	State RI	^{Zip} 02914	City:	State	Zip	
Secretary Name Gregory L. Lucini			Treasurer Name Gregory L. Lucini			
Street Address 940 Waterman Avenue			Street Address 940 Waterman Avenue			
East Providence	State RI	^{Ζίρ} 02914	City East Providence	State RI	^{Zip} 02914	
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATT: Director Name Kenneth R. Palumbo			ACHMENT) THE FILL IN SPACES BEFORE USING ATTACHMENTS Director Name Gregory L. Lucini			
Street Address 940 Waterman Avenue			Street Address 940 Waterman Avenue			
City East Providence	State RI	<i>Ζίρ</i> 02914	Cuy East Providence	State RI	<i>Zip</i> 02914	
Director Name			Director Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ISSUED SHARES — THIS SECTION MUST BE COMPLETED			
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.			Number of Shares	Class/Series	Par Value	
			350	Common	\$1.00	
]		
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				
	EB 2 3 2009			
Check No	1607			
, 	R SECRETARY OF STATE USE ONLY			

Under penalty of perjury, I declare and affirm	
including any accompanying schedules and contained herein are true and correct.	statements, and that all statements 3//8/05
Signature Gregory L. Lucini	Date
Print or Type Name	
President	
Title	Form 630 Rev. 08/08