

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street

Providence, RI 02904-261

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2009 401.222.

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(c&d)) is subject to a penalty fee of \$25.00. 401.222.304

1. Corporate ID No. 139335	2. Name of Corp Middle Stre	poration eet Realty, Inc.	refusing to file its annual repor			
3. Street Address Principal E 76 East Street	lusiness Office		City	State	Zip	
4. Business Phone No.		5. State of Incorpor	Pawtucket	RI	02860	
401-728-1613		I Phada isiaa	ration d			
6. Brief Description of the G	baracter of Business Conduc					
, baronga, sale,	TUTILAL AND IARSA OF M	ASI Asiata and	er lawful husiness			
7. NAMES AND ADDE	lesses of the Offi	CERS: ("X" BOX FOR	ATTACHMENTS	Brand Commence		
lanu M. Mana			er lawful business. ATTACHMENT) FILL IN Vice President Name	SPACES BEFORE USING	ATTACHMENTS	
STATE IN STRUCT			Noor J. Memon			
Street Address			Street Address			
same as above			same as above			
••••	State	Zip	Gity			
Secretary Name				State	Zψ	
Noor J. Memon			: Treasurer Name			
Street Address				Janu N. Memon		
same as above			Street Address	Street Address		
City .	e		same as above			
•	State	Ζψ,	City	State		
8. NAMES AND ADDR	Peepe on week	Silvi Seddo i verigen proprie a la calcia de la calcia del calcia de la calcia del la cal		· · · · · · · · · · · · · · · · · · ·	Ζψ	
Director Name	roaga OF THE DIRE	CTORS: ("X" BOX FO	R ATTACHMENT) FILL 1	N SPACES REPORTS	<u> </u>	
Janu N. Memon					G ATTACHMENTS	
Street Address			Noor J. Memon	Noor J. Memon		
same as above			Street Address	Street Address		
City	State		: same as above			
	, , , , , , , , , , , , , , , , , , ,	Zψ	City	State	70.	
Director Name	······J				Ζψ	
			Director Name			
Street Address			Street Address			
Street Address			Sireet Address			
	State		Street Address			
	State	Zy	Gity	State	170	
City	,		Gity		Zip	
On SHARES AUTHORIZ	,		Gity		T	
City SHARES AUTHORIZ AUTHORIZED SHARES	ED ("X" BOX FOR A	\ КТТАСНИВОТ) □	Gly 10. SHARES ISSUED	("X" BOX FOR ATTACL	Electric Fil	
O. SHARES AUTHORIZ OUTHORIZED SHARES Juniber of Shares	Class/Series		City 10. SHARES ISSUED ISSUED SHARES — THIS SE	("X" BOX FOR ATTAGI CTION MUST BE COMPLETED	HMENT)	
. SHARES AUTHORIZ UTHORIZED SHARES Jumber of Shares	Class/Series	\ КТТАСНИВОТ) □	10. SHARES ISSUED ISSUED SHARES — THIS SE Number of Shares	("X" BOX FOR ATTACL	ELECTION FO	
O. SHARES AUTHORIZ OUTHORIZED SHARES Juniber of Shares	Class/Series	\ КТТАСНИВОТ) □	City 10. SHARES ISSUED ISSUED SHARES — THIS SE	("X" BOX FOR ATTAGI CTION MUST BE COMPLETED	HMENT)	
O. SHARES AUTHORIZ AUTHORIZED SHARES Vumber of Shares 1,000 Common No I	Class/Series Par Value	ATTACHMENT) [10. SHARES ISSUED ISSUED SHARES — THIS SE Number of Shares	("X" BOX FOR ATTACI CTION MUST BE COMPLETED Class/Series Common	Par Value No Par Value	

File Date	27-09
Check No.	830
Ву:	mne
FOR SECRETARY	OF STATE USE ONLY

Under penalty of perjury, I declare and a including any accompanying schedules contained herein are true and correct.	uffirm that I have examined this report, and statements, and that all statements
Signature memon	2-10-09.
V	Date

Janu N.	Memon				
Print or Type Name					

President

Title