

FOR SECRETARY OF STATE USE ONLY

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

1. Corporate ID No. 11182	Shun Pike	2. Name of Corporation Shun Pike Realty, Inc.				
3. Street Address Principal Business Office 1350 Central Avenue			Johnston	State RI	Ζφ 029 19	
4. Business Phone No. 5. State of Incorporation Rhode Island						
6. Brief-Description of the Cha	racter of Business Condi	icted in Rhode Island				
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTA President Name Nicholas Castelli			Vice President Name Joanna Castelli			
Street Address 1350 Central Avenue			Street Address 1350 Central Avenue			
Johnston	State RI	^{Zip} 02919	City Johnston	State RI	^{Ζφ} 02919	
Secretary Name Nicholas Castelli			Treasurer Name Joanna Castelli			
Street Address 1350 Central Avenue			Street Address 1350 Central Avenue			
City Johnston	State RI	χφ 02919	City Johnston	State RI	^{Zip} 02919	
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATT Director Name No Board of Directors			TACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Director Name			
Street Address			Street Address			
City	State	Zip	City	State ,	Zip	
Director Name			Director Name			
Street Address			Street Address			
City	State	Zīp	СИУ	State	Zip	
9. SHARES AUTHORIZE	E D	ı	Ī.	D <i>("X" BOX FOR ATTAC</i> SECTION <u>MUST</u> 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	
			600	common	по раг	
-						
This report must be exect this report must be exect	cuted on behalf of t uted on behalf of th	he corporation by an authorize te corporation by the receiver	ed representative. If the or trustee.	corporation is in the hand	ls of a receiver or trustee.	
File Date FIL	ED		including applac		that I have examined this report atements, and that all statement 2/21/09	
Check No. MAR	2 2999		Signature Nicholas C	astelli	Dule	
By: RV	292		Print or Type Nan			

President

Title