

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

subject to a penalty fee of \$25.0 1. Corporate ID No.	2. Name of Con	boration	<u> </u>			
2349	BESS-MAI	BESS-MAR REALTY CORPORATION				
3. Street Address Principal Business Office 10 Greene Street			City Providence	State RI	^{Zip} 02903	
4 Business Phone No. 401-273-8010 5. State of Incorporation Rhode Island						
6. Brief Description of the Cha Real Estate						
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTAC			·6. 1 · 0 · 1 · 400 · 4 · 4 · 4 · 4 · 4 · 4 · 4 · 4 ·	SPACES BEFORE USING	ATTACHMENTS	
President Name Heidi Liss			Vice President Name none			
Street Address			Street Address			
25 Fulton Street			Sheet Address			
City Weehawken	State NJ	^{2ip} 07086	City	State	Zip	
Secretary Name Heidi Liss			Treasurer Nume Heidi Liss			
Street Address 25 Fulton Street			Street Address 25 Fulton Street			
Weehawken	State NJ	^{Zip} 07086	City Weehawken	State NJ	^{Ζφ} 07086	
8. NAMES AND ADDRI Director Name Heidi Liss	SSES OF THE DIR	CTORS ("X" BOX FOR ATT	ACHMENT) TRILL I Director Name	n spaces before usin	G ATTACHMENTS	
Street Address			Street Address			
25 Fulton Street						
Weehawken	State NJ	^{Zip} 07086	City	State	Zip.	
Director Name			Director Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
9. SHARES AUTHORIZ	ED		\$-1	("X" BOX FOR ATTACE ECTION MUST BE COMPLETED	(MENT)	
This information is cur	rently of record in t	he Office of the Secretary of	Number of Shares	. Class/Series	Par Value	
State. Changes require an additional filing. See Section 9 of instruction sheet.			300 Shares	Common	No Par Value	
					7:11 (7)	
		he corporation by an authorize the corporation by the receiver		corporation is in the hands	s of a receiver or trustee.	
FIL	ED		including any acc	ompanying schedules and sta	hat I have examined this reportements, and that all statement	
MAN A			contained herein	are true and correct		
trite Date MAR Q	6 AUR		Hert		2 21/09	

FILED	Under penalty of perjury, I declare and affirm that I including any accompanying schedules and stateme
Pile Date MAR 0.3 2809	contained herein are true and correct. Signature
Check No.	HEIOI LISS Print or Type Name
FOR SECRETARY OF STATE USE ONLY	Preside +