

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

2009

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. 114827	2. Name of Corporation Joseph Martino Realtors, Inc.					
3. Street Address Principal Business Office 228 High Service Avenue			North Providence	State RI	^{Zip} 02911	
4. Business Phone No. 5. State of Incorporation RHODE ISLAND						
6. Brief Description of the Character of Buying, selling, leasing, rent			ite and real property.			
7. NAMES AND ADDRESSES	OF THE OFFICERS:	("X" BOX FOR ATTA	CHMENT) 🔲 FILL IN SPA	CES BEFORE USING	ATTACHMENTS	
President Name			Vice President Name			
Joseph Martino			Joseph Martino			
Street Address 228 High Service Avenue			Street Address 228 High Service Avenue			
City North Providence	State RI	^{Zip} 02904	City North Providence	State RI	Ζίρ 029 04	
**********************************	.1	102304	Treasurer Name	I.:::		
Secretary Name Joseph Martino			Joseph Martino			
Street Address 228 High Service Avenue			Street Address 228 High Service Avenue			
North Providence	State RI	02904	City North Providence	State RI	^{Zip} 02904	
8. NAMES AND ADDRESSES	OF THE DIRECTOR	S: ("X" BOX FOR ATT	TACHMENT) FILL IN SE	ACES BEFORE USIN	G ATTACHMENTS	
Director Name			Director Name			
None			Street Address			
Street Address						
City	State	Zip	City	State	Zip	
Director Name		.1	Director Name	l		
Street Address			Street Address			
City	State	Zip	City	State	Zip	
9. SHARES AUTHORIZED			10 CHARTE ISSUED ("		 HMENT) □	
9. SHARES AUTHORIZED				10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
			Number of Shares	Class/Series	Par Value	
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.			100	Common	No Par Value	
			100	Common	Tro i di valac	
This report must be executed	on babalf of the com	poration by an authorize	ad raprasantativa. If the corn	oration is in the hand	s of a receiver or trustee	
this report must be executed	on behalf of the corn	oration by the receiver	or trustee.	oration is in the hand	s of a receiver of trustee,	
ans report must be executed	on commit of the corp	oranion of the receiver	V 201001			
			Lindar nonalty of paris	www. I declare and affirm	that I have examined this repor	
					atements, and that all statemen	
	· · · · · · · · · · · · · · · · · · ·	7	contained herein are t	me and cornect.	1	
File Date	r		timen l	Min	T'	
			Signature	July Control	Date	
Check No. MAY 182	nng		Joseph Martin	· n		
"I'N' 10'	.003 Q 1	-	Print or Type Name	<u> </u>		
By: By	14/5/3	_	Prosident			

Title