



STATE OF RHODE ISLAND  
AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State

A. Ralph Mollis, Secretary of State  
Corporations Division  
148 W. River St., Providence, RI 02904-2615  
401.222.3040

**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2007**

**Filing Period: January 1 - March 1 • Filing Fee: \$50.00**

\* In accordance with R.I.G.L. 7-1.2-150(c), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-150(c&d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 84320  
2. Name of Corporation BLUESTONE, INC.  
3. Street Address Principal Business Office  
150 CHESTNUT STREET  
City PROVIDENCE State RI Zip 02903  
4. Business Phone No. (401) 277-0300  
5. State of Incorporation RHODE ISLAND

6. Brief Description of the Character of Business Conducted in Rhode Island  
TO ACQUIRE BY PURCHASE, LEASE, OR OTHERWISE AND TO IMPROVEAN DEVELOP REAL PROPERTY.

**7. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name David Malkin Street Address 150 Chestnut Street City Providence State RI Zip 02903	Vice President Name David Malkin Street Address 150 Chestnut Street City Providence State RI Zip 02903
Secretary Name David Malkin Street Address 150 Chestnut Street City Providence State RI Zip 02903	Treasurer Name David Malkin Street Address 150 Chestnut Street City Providence State RI Zip 02903

**8. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name David Malkin Street Address 150 Chestnut Street City Providence State RI Zip 02903	Director Name  Street Address  City State Zip
Director Name  Street Address  City State Zip	Director Name  Street Address  City State Zip

**9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) ☐**

AUTHORIZED SHARES	Class/Series	Par Value
Number of Shares		
4,000 COMM NO PAR VALUE		

**10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐**

ISSUED SHARES	Class/Series	Par Value
Number of Shares		
100	Common	None

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.



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File Date 2/9/07

Check No. 1754

By: [Signature]

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature

David Malkin

Print or Type Name

President

Title

Form 630 12/05