RI SOS Filing Number: 201058207830 Date: 02/09/2010 4:00 PM

State of Rhode Island
and Providence Plantations
Office of the Secretary of State

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 2010

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.	2. Name of Corporation			
1562	ATWELLS REALTY CORP.			
3. Street Address Principal Business Office		City	State	Zip
ONE FRANKLIN SQUARE		PROVIDENCE	R.I	02903
4. Business Phone No.	5. State of Incorporation			
(401) 274-5560	RHODE ISLAND			

6. Brief Description of the Character of Business Conducted in Rhode Island
TO BUY, SELL AND LEASE REAL ESTATE AND OPERATE RESTAURANTS

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

President Name	Vice President Name
"NONE"	GERARD DISANTO II
Street Address	Street Address
	729 CENTRAL AVE.
City / State / Zip	City / State / Zip
	JOHNSTON / R.I / 02919
Secretary Name	Treasurer Name
GERARD DISANTO II	GERARD DISANTO II
Street Address	Street Address
729 CENTRAL AVE.	729 CENTRAL AVE.
City / State / Zip	City / State / Zip
JOHNSTON / R.I. / 02919	JOHNSTON / R.I. / 02-919

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

Director Name	Director Name
GERARD DISANTO	
Street Address	Street Address
729 CENTRAL AVE	
City / State / Zip	City / State / Zip
JOHNSTON / R.I. / 02919	
Director Name	Director Name
Street Address	Street Address
City / State / Zip	City / State / Zip

9. SHARES AUTHORIZED
1,000 NO 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.

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

ISSUED SHARES — THIS SECTION MUST BE COMPLETED

Number of Shares	Class/Series	Par Value
100	Common	NO PAR VALUE

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.

[redacted]

[redacted]

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 — 2/1/10 *Date*

GERARD DISANTO II
Print or Type Name

[redacted]

VICE PRESIDENT
Title

File Date 2-9-2010
Check No. 10506
By: MNC

FOR SECRETARY OF STATE USE ONLY

44952-17-481978

Form 630 Rev. 08/08