

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

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(ebrd.)) is whiret to a penalty fee of \$25.00.

Street Address Principal Business (en Greens	Providence Le Island	State	02908
35°C91	office nden Ave	5. State of Incorporation	Providence	1 PCL	02908
Business roome No.		Rh ad	+ IS/91d		
401-330-9. Brief Description of the Character	of Business Conducted				
Mongale Real E	STOTE Pro	PERTY and all	other legal Busine	os-es IN Me	e Sale of Rhode
NAMES AND ADDRESSES	OF THE OFFICE	RS: ("X" BOX FOR ATTA	CHMENT) FILL IN SPACE	ES BEFORE USING A	TTACHMENTS
resident Name			Vice President Name		
Chris 10192	J C09/20		Street Address		
Chris Topher J CogTes Three Address P.O. Box Providence City Providence State Providence State Providence State Providence State Providence State Providence			Silve (Martes)		
ily a	State	Zip 0	City	State	Zip
Providence	KL	02908]
ecretary Name			Treasurer Name	2 Tec	
			Stront Address	09/ =3	
treet Address			Street Address Po. Box Do City Providence	8211	
City:	State	Zip	City Pray donne	State OC	Zip _
			•	1	02968
. NAMES AND ADDRESSE	S OF THE DIRECT	ORS: ("X" BOX FOR AT	TACHMENT) TILL IN SPA	CES BEFORE USING	ATTACHMENTS
Director Name Chris To	Pher JC	09Tes	Director Name		1
Charact Addense		,	: Street Address		3 s
City Providence State PI 24. 02908					
City 1	State 0 2	24.	City	State	200 202X
providence	KL	02400			
Director Name			Director Name		🗲 अञ्चल
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Street Address			Juste Maness		
City	State	Zip	City	State	<u>6</u> 22 % ₹2
					36
9. SHARES AUTHORIZED	•		10. SHARES ISSUED ("X"		IMENT)
			ISSUED SHARES — THIS SECTION	T	
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
			For The stand	NONE	MO PAT VAI
			7000 7000 00. 27		
This report must be execute	ed on behalf of the	corporation by an authori	zed representative. If the corpo	ration is in the hands	of a receiver or trustee
this report must be execute	d on behalf of the o	corporation by the receive	r or trustee.		
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					hat I have examined this re
		 _	contained herein are are	nying schedules and sta	tements, and that all stater
			COMMINED HEIGHT		3/26 4/
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Chuck May		—	<u></u>	istopher 5	C 08/62
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By:FOR SEC BY RY/ON		<u>[0]</u>	Print or Type Name	ident	Julio 30 Rev. 08/03