

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

subject to a penalty fee of \$2	5.00.		,			
1. Corporate ID No. 33311	2. Name of Con Joseph Re	2. Name of Corporation Joseph Realty Co., Inc.				
3. Street Address Principal Business Office 21 Garden City Drive			Ctty Cranston	State RI	гір 02910	
4. Business Phone No. 5. State of Incorporation (401) 946-3800 Rhode Island						
6. Brief Description of the C Rental property.	haracter of Business Condu	cted in Rhode Island				
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTAC President Name Jean Marzilli			CHMENT) TILL IN SPACES BEFORE USING ATTACHMENTS Vice President Name Emma D'Antuono			
Street Address 25 Edmond Drive			Street Address 117 Northbridge Avenue			
City Warwick	State RI	^{Zip} 02886	^{City} Warwick	State RI	^{Zip} 02886	
Secretary Name Emma D'Antuono			Treasurer Name Jean Marzilli			
Street Address 117 Northbridge Avenue			Street Address 25 Edmond Drive			
City: Warwick	State RI	^{Zip} 02886	Сиу Warwi ck	State RI	^{Zip} 02886	
8. NAMES AND ADDI Director Name Jean Marzilli	RESSES OF THE DIRI	ECTORS: ("X" BOX FOR ATT	ACHMENT) FILL I Director Name	n spaces before usin	G ATTACHMENTS	
Street Address 25 Edmond Drive			Street Address			
City Warwick	State RI	2ip 02886	City	State	Zip	
Director Name			Director Name			
Street Address			Street Address			
City	State	Zip	Сиу	State	Z.ţp	
9. SHARES AUTHOR	IZED	I		 <i>("X" BOX FOR ATTAC</i> ECTION <u>MUST</u> BE COMPLETED		
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	
			10	Common	No par value	
This raport must be a	vacuted on behalf of t	he corporation by an authorize	d range antative. If the	corneration is in the base	le of a receiver or tructue	
		ne corporation by the receiver		corporation is in the nane	is or a receiver or musice,	

	including ar contained h
File Date FILED	
Check No. JUN 0 2 2010	Signature Jean Ma
By: By 16924	Print or Type
FOR SECRETARY OF STATE USE ONLY	Preside

Under penalty of perjury, I declare and affirm that I have examined this report, ny accompanying schedules and statements, and that all statements

erein/are true and correct. arzilli

e Name

ent and Treasurer