



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 2011

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. 34679		2. Name of Corporation Rave Realty Company, Inc.			
3. Street Address Principal Business Office 12 Bend Street			City Johnston	State R.I.	Zip 02919
4. Business Phone No. 401-944-9604		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island Real Estate and any other related lawful purpose.					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Raymond Rave			Vice President Name Geraldine Rave		
Street Address 12 Bend Street			Street Address 12 Bend Street		
City Johnston	State R.I.	Zip 02919	City Johnston	State R.I.	Zip 02919
Secretary Name Geraldine Rave			Treasurer Name Raymond Rave		
Street Address 12 Bend Street			Street Address 12 Bend Street		
City Johnston	State R.I.	Zip 02919	City Johnston	State R.I.	Zip 02919
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Raymond Rave			Director Name Geraldine Rave		
Street Address 12 Bend Street			Street Address 12 Bend Street		
City Johnston	State R.I.	Zip 02919	City Johnston	State R.I.	Zip 02919
Director Name N/A			Director Name N/A		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
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.			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.

FILED

File Date: JAN 20 2011

Check No. _____

By: [Signature] 960

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] Jan 12 - 2011
Signature Date
Raymond Rave
Print or Type Name
President
Title