

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 - N * In accordance with R.I.G.L. 7-1.2- subject to a penalty fee of \$25.00.	March 1 • Filing Fee: 1501(e), each corporation fai	\$50.00* • THIS REPOI iling or refusing to file its ann	RT MUST BE TYPED OR ual report within thirty (30) days	PRINTED LEGIBLY IN after the time prescribed by law (BLACK INK. (R.I.G.L. 7-1.2-1501(c&d)) is
1. Corporate ID No. 128971	2. Name of Corporation The Discovery G.	2. Name of Corporation The Discovery G. Corp.			
3. Street Address Principal Business Office 1145 Main Street, Suite #3		^{City} Pawtucket	State Rhode Island	^{Zip} 02860	
· · · · · · · · · · · · · · · · · · ·		5. State of Incorporation Rhode Island	n		
6. Brief Description of the Character The acquisition of real estat	ė				
7. NAMES AND ADDRESSES President Name	OF THE OFFICERS:	("X" BOX FOR ATTA		ACES BEFORE USING AT	TTACHMENTS
Stefania M. Mardo			Vice President Name None		
Street Address			Street Address		
1145 Main Street, Suite #3					
City Pawtucket	State RI	^{Zip} 02860	City	State	Zip
Secretary Name Stefania M.Mardo			Treasurer Name Stefania M. Mardo		
Street Address 1145 Main Street, Suite #3			Street Address 1145 Main Street, Suite #3		
Pawtucket	State RI	^{Ζφ} 02860	City Pawtucket	State RI	^{Zip} 02860
8. NAMES AND ADDRESSES Director Name	OF THE DIRECTORS	: ("X" BOX FOR ATT	ACHMENT) FILL IN : Director Name	SPACES BEFORE USING	ATTACHMENTS
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name	•••••••	·····	Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED 1,000 comm no par value			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT)		
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
			100	Common	No par value
This report must be executed this report must be executed				rporation is in the hands o	of a receiver or trustee,
-	L C D		Under nonelty of	riper. I danlara and affirm the	t I have examined this serve
[7]	LED			rjury, I declare and affirm that panying schedules and state	

FILED	Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements
File DateFEB 2.8 2011	contained herein are true and correct. Signature Date
Check No. BY 510972948	Stefania M. Mardo Print or Type Name
FOR SECRETARY OF STATE USE ONLY	President Title Form 630 Rev. 08/08