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

2011

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(c), 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
9134	E + E REALTY CO.

3. Street Address Principal Business Office	City	State	Zip
15 SMITH AVE	GREENVILLE	R.I	02828

4. Business Phone No.	5. State of Incorporation
401-949-0730	R.I.

6. Brief Description of the Character of Business Conducted in Rhode Island
RENTAL PROPERTY

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

President Name	Vice President Name
STEPHEN HOPKINS	THOMAS HOPKINS
Street Address: 8 APPLESEED DRIVE	Street Address: 7 CHOPMIST HILL RD
City: GREENVILLE State: RI Zip: 02828	City: CHEPACHET State: R.I Zip: 02814
Secretary Name: Roberta Paine	Treasurer Name: Roberta Paine
Street Address: 1265 Putnam Pike	Street Address: 1265 Putnam Pike
City: CHEPACHET State: RI Zip: 02814	City: CHEPACHET State: R.I Zip: 02814

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

Director Name	Director Name
STEPHEN HOPKINS	THOMAS HOPKINS
Street Address: 8 APPLESEED DR.	Street Address: 7 CHOPMIST HILL RD
City: Greenville State: RI Zip: 02828	City: CHEPACHET State: RI Zip: 02814
Director Name: ROBERTA PAINE	Director Name:
Street Address: 1265 Putnam Pike	Street Address:
City: Chepachet State: RI Zip: 02814	City: State: Zip:

9. SHARES AUTHORIZED

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
600	common	

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]

FILED

File Date: MAR 01 2011
Check No. By: MME
By: 5547
FOR SECRETARY OF STATE USE ONLY

[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.

Roberta Paine — 2/26/11
Signature — *Date*

Roberta Paine
Print or Type Name

Secretary
Title

[redacted]

Form 630 Rev. 08/08