

## State of Rhode Island and Providence Plantations Office of the Secretary of State

Fee: \$50.00

Division Of Business Services 148 W. River Street Providence RI 02904-2615 (401) 222-3040

| LOGOUT |

<b>Business</b>	Corporation
Annual R	eport

Filing Period, January 1 - March 1

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in accordance with R/GL, 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/LGL) 7-1.2-1501(c&d!) is subject to a penalty fee of \$25.00.

nelp with this form

ANNUAL REPO	ORT YEAR: 2012					
1. Corporate II	No. 000137214					
2. Name of Corporation Owner Realty, Inc.						
3. Street Addre	ss Principal Business Office:					
No. and Street:	190 LLOYD ROAD					
City or Town:	NORTH KINGSTOWN	State: RI	Zip: 02874	Country: USA		
4. Business Ph	one No.					
4012952020				_		
5. State of Inco	orporation	h				
State: RI						

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

ALL ASPECTS OF REAL ESTATE, BROKERING, BUYING, SELLING, RENTING

**FILED** JAN 04 2012

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete.

	Title	Individual Name	Address
Delete		First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
	TREASURER	CARL T MARCIANO JR	190 LLOYD ROAD NORTH KINGSTOWN, RI 02874 USA
	SECRETARY	CARL T MARCIANO JR	190 LLOYD ROAD NORTH KINGSTOWN, RI 02874 USA
	VICE PRESIDENT	CARL T MARCIANO JR	190 LLOYD ROAD NORTH KINGSTOWN, RI 02874 USA
	DIRECTOR	CARL T MARCIANO JR	190 LLOYD ROAD NORTH KINGSTOWN, RI 02874 USA
	President	CARL T. MARCIANO JR	190 LLOYD ROAD NORTH KINGSTOWN, RI 02874 USA

Select From Below Title:

First Name:

Middle Name:

Last Name:

Suffix: Country:

Address:

City:

Zip: State:

Clear

Add

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares Number of Shares 8,000,00	Total Issued and Outstanding Num of Shares				
311		\$0.00	8,000.00	0.00				
9. 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.								
Filer's Contact Information (Enter a contact name, mailing address and email.) Contact Name:  Carl Tlaava and, Tr  Business Name:  Onker Realty I4C  No. and Street:  120 CARRIAGE HILL ROAD  - Same Address as -  190 LLoyd Road  City or Town:  NORTH KINGSTOWN  State: RI  Zip: 02852  Country:  Contact Phone:  40182859287  ext:								
Contact Phone: 401885257 ext:  Contact Email: 294-7668 CT Marciato CA ol. Com Clear  Please provide an email address to receive an expedited response from us if the filing is rejected for any reason. If no email address is provided, we will respond by mail.								
Signed this 31 Day of December, 2011 at 9:24:15 AM. This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.								
D. Die Ca. / -	thouse CA	A - 1-12 1 1 TI-	F	ILED				
By Car/ Signature of Author	/ <i>POPIA&gt; IV</i> rized Representative	e of the Corporation	(Δ)	<b>4 0 4</b> 2012				
CarlTI	1.1			mn e				
Title V			BY	137114				
Title Pusided This report cannot be accepted for filing if an officer has executed the form and he/she is not listed in section 7.								
electronic Gen. Laws	document is sul § 7-1.2. You h	ereby acknowledge that bmitted in compliance we rereby agree that any leng from the submission ept   Decline	ith R.I. gal issues	<b>*</b>				
Click HERE to Submit This Information								
Form No. 630 Revised 09/07								
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