



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 2012**

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)(4)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 10155		2. Name of Corporation Ser Vis Realty Inc			
3. Street Address Principal Business Office 543 Atwood Avenue			City CRANSTON	State R.I.	Zip 02920
4. Business Phone No. 401-944-1100		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island To Own and Lease Real Estate Property					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Pasco M. DiBiasio			Vice President Name Richard E. DiBiasio		
Street Address 545 Atwood Avenue			Street Address 545 Atwood Avenue		
City CRANSTON	State R.I.	Zip 02920	City CRANSTON	State R.I.	Zip 02920
Secretary Name Nancy STRAVATO			Treasurer Name Pasco M. DiBiasio		
Street Address 545 Atwood Avenue			Street Address 545 Atwood Avenue		
City CRANSTON	State R.I.	Zip 02920	City CRANSTON	State R.I.	Zip 02920
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name None			Director Name		
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 100 Comm No Par			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.					
Number of Shares		Class/Series		Par Value	
18		Common		No Par	

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 31 2012

Check No. 168

BY: \_\_\_\_\_

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: Nancy Stravato Date: 1/27/12

Print or Type Name: Nancy STRAVATO

Title: Secretary