



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

A. Ralph Molits, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
(401) 222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2012^{WK}

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)(1)), subject to a penalty fee of \$25.00.

| | | | |
|--|---------------|---|------------------------|
| 1. Corporate ID No. 369 | | 2. Name of Corporation ACTIVE REAL ESTATE INC | |
| 3. Street Address Principal Business Office 179 VERNON AVE | | | City MIDDLETOWN |
| | | | State R.I. |
| | | | Zip 02842 |
| 4. Business Phone No. 401 847 1892 | | 5. State of Incorporation RHODE ISLAND | |
| 6. Brief Description of the Character of Business Conducted in Rhode Island | | | |
| 7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS | | | |
| President Name William J CARDOZA | | Vice President Name William J CARDOZA | |
| Street Address 179 VERNON AVE | | Street Address 179 VERNON AVE | |
| City MIDDLETOWN | State R.I. | City MIDDLETOWN | State R.I. |
| Zip 02842 | | Zip 02842 | |
| Secretary Name William J CARDOZA | | Treasurer Name William J CARDOZA | |
| Street Address 179 VERNON AVE | | Street Address 179 VERNON AVE | |
| City MIDDLETOWN | State R.I. | City MIDDLETOWN | State RI |
| Zip 02842 | | Zip 02842 | |
| 8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS | | | |
| Director Name William J CARDOZA | | Director Name William J CARDOZA | |
| Street Address 179 VERNON AVE | | Street Address 179 VERNON AVE | |
| City MIDDLETOWN | State RI | City MIDDLETOWN | State RI |
| Zip 02842 | | Zip 02842 | |
| Director Name NONE | | Director Name NONE | |
| Street Address | | Street Address | |
| City | State | City | State |
| Zip | | Zip | |
| 9. SHARES AUTHORIZED 1200 | | 10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> | |
| ISSUED SHARES — THIS SECTION MUST BE COMPLETED | | | |
| 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 1200 | Class/Series Common |
| | | | Par Value 0 |

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 | FEB 02 2012 |
| Check No. | 188 |
| 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: William J Cardoza Date: 2-3-12
Print or Type Name: William J CARDOZA
Title: PRES.