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STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State - Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040 ~ **Email:** corporations@sos.ri.gov ~ **Website:** www.sos.ri.gov

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2012

Filing Period: January 1 - March 1 • **This report must be typed or printed legibly.**
Filing Fee: $50.00 • **FAILURE TO FILE THIS REPORT BY MARCH 31 WILL RESULT IN A $25.00 PENALTY FEE.**

1. Entity ID No.	2. Exact name of the Corporation
312505	288 Sayles Avenue Inc.

3. Principal office address	City	State	Zip
65 Dorman Avenue	N. Providence	RI	02904

4. Business Phone No.	5. State of Incorporation
401-475-6506	Rhode Island

6. Brief description of the character of business conducted in Rhode Island
Purchase, rental, sales, leasing of real estate, residential and commercial

7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) ☐

President Name	Street Address	City	State	Zip
Gregory J. Iannuccillo	65 Dorman Avenue	N. Providence	RI	02904

Vice-President Name	Street Address	City	State	Zip

Secretary Name	Street Address	City	State	Zip
Joseph J. Recupero	362 Broadway	Providence	RI	02909

Treasurer Name	Street Address	City	State	Zip
Joseph J. Recupero	362 Broadway	Providence	RI	02909

8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) ☐

Director Name	Street Address	City	State	Zip
Gregory J. Iannuccillo	65 Dorman Avenue	N. Providence	RI	02904

Director Name	Street Address	City	State	Zip
Joseph J. Recupero	362 Broadway	Providence	RI	02909

Director Name	Street Address	City	State	Zip

Director Name	Street Address	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) ☐

NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
400	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 FEB 22 2012
Check No 1328
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.

2/20/2012
Signature of Authorized Representative — Date

Joseph J. Recupero
Print or Type Name of Authorized Representative

Form No. 630
Revised: 01/2012
73566-56-729017