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

A. Ralph Mollis, *Secretary of Stat*
Corporations Divisio
148 W. River Stre
Providence, RI 02904-261
401.222.304

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&d)) is subject to a penalty fee of $25.00.*

1. Corporate ID No.	2. Name of Corporation			
11494	Eastern Realty Corporation			
3. Street Address Principal Business Office		City	State	Zip
9 Humbert Street		North Providence	Rhode Island	02911
4. Business Phone No.	5. State of Incorporation			
401-237-8330	Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island				
Manufacturing				

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

President Name			Vice President Name		
Anthony Salvatore Jr			Anthony Salvatore Jr		
Street Address			Street Address		
6 Dario Drive			6 Dario Drive		
City	State	Zip	City	State	Zip
Lincoln	Rhode Island	02865	Lincoln	Rhode Island	02865
Secretary Name			Treasurer Name		
Anthony Salvatore Jr			Anthony Salvatore Jr		
Street Address			Street Address		
6 Dario Drive			6 Dario Drive		
City	State	Zip	City	State	Zip
Lincoln	Rhode Island	02865	Lincoln	Rhode Island	02865

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

Director Name			Director Name		
Anthony Salvatore Jr					
Street Address			Street Address		
6 Dario Drive					
City	State	Zip	City	State	Zip
Lincoln	Rhode Island	02865			
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	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
100	Common	no par value

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]

[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.

Signature *Date* 2/14/10

Anthony Salvatore Jr.
Print or Type Name

Title

FILED
File Date
Check No. FEB 23 2012
By: BY 29408
73621-59-727158
FOR SECRETARY OF STATE USE ONLY

[redacted]

Form 630 Rev. 08/08