

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 same prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is within the content of the cont

subject to a penalty fee of \$25.00.			· · · · · · · · · · · · · · · · · · ·		
1. Corporate ID No. 570945	2. Name of Corporation TABARES BROS 3, INC				
3. Street Address Principal Bustness Office 768 BROAD STREET			City CENTRAL FALLS	State RI	02863-2331
4. Business Phone No. 401-663-7167 5. State of Incorporation RHODE ISLAND					
6. Brief Description of the Character of RENTAL PROPERTY					
7. NAMES AND ADDRESSES	OF THE OFFICERS:	("X" BOX FOR ATTA	CHMENT) 📋 FILL IN SPAC	CES BEFORE USING	GATTACHMENTS
President Name			Vice President Name		
CRISTIAN TABARÉS			GEOVANNY TABARES		
Street Address 108 FOUNDRY STREET			Street Address 108 FOUNDRY STREET		
CENTRAL FALLS	State RI	^Z 02863	City CENTRAL FALLS	State RI	02863
Secretary Name SERGIO TABARES			Treasurer Name		
Street Address 108 FOUNDRY STREETV			Street Address		
City CENTRAL FALLS	State RI	<i>Z</i> φ 02863	City	State	Zip
8. NAMES AND ADDRESSES	OF THE DIRECTOR	S: ("X" BOX FOR ATT	ACHMENT) [FILL IN SP.	ACES BEFORE USI	NG ATTACHMENTS
Director Name CRISTIAN TABARES			Director Name GEOVANNY TABARES		
Street Address 108 FOUNDRY STREET			Street Address 108 FOUNDRY STREET		
C#y:	State	Ζŧp	City	State	Zip
CENTRAL FALLS	RI	02863	CENTRAL FALLS	RI	02863
Director Name			Director Name		
Street Address			Street Address		
Cthy	State	Ζip	City	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) 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	Class/Series	Par Value
			1000	STK	\$0.01
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. FEB 2 8 2012 Under penalty of perjury, I declare and affirm that I have examined this report including any accompanying schedules and statements, and that all statements					
File Date Check No.		By 11,481° OS	including by faccompactory from the control of the	ue and correct.	statements, and that all statemen 2-7-12 Date
<i>By</i> :			Print or Type Name PRESIDENT		
FOR SECRETARY OF STA	ATE USE ONLY		Title		Form 630 Rev 08/08