



**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. <b>675596</b>		2. Exact name of the Corporation <b>MIBIT Capital Holding Co.</b>			
3. Principal office address <b>3675 South Rainbow Blvd., Ste. 107-400</b>			City <b>Las Vegas</b>	State <b>NV</b>	Zip <b>89144</b>
4. Business Phone No.			5. State of Incorporation <b>Nevada</b>		
6. Brief description of the character of business conducted in Rhode Island <b>To own, invest in and manage property, as well as engage in any other legal activity</b>					
President Name <b>Michael Integlia, Jr.</b>			Vice-President Name <b>Michael Integlia, III</b>		
Street Address <b>220 South Main Street</b>			Street Address <b>220 South Main Street</b>		
City <b>Providence</b>	State <b>RI</b>	Zip <b>02903</b>	City <b>Providence</b>	State <b>RI</b>	Zip <b>02903</b>
Secretary Name <b>Kenneth Proto</b>			Treasurer Name <b>Brendon Integlia</b>		
Street Address <b>220 South Main Street</b>			Street Address <b>220 South Main Street</b>		
City <b>Providence</b>	State <b>RI</b>	Zip <b>02903</b>	City <b>Providence</b>	State <b>RI</b>	Zip <b>02903</b>
7. NAMES AND ADDRESSES (SEE INSTRUCTIONS) <input type="checkbox"/>					
Director Name <b>Michael Integlia, Jr.</b>			Director Name <b>Michael Integlia, III</b>		
Street Address <b>220 South Main Street</b>			Street Address <b>220 South Main Street</b>		
City <b>Providence</b>	State <b>RI</b>	Zip <b>02903</b>	City <b>Providence</b>	State <b>RI</b>	Zip <b>02903</b>
Director Name <b>Kenneth Proto</b>			Director Name <b>Brendon Integlia</b>		
Street Address <b>220 South Main Street</b>			Street Address <b>220 South Main Street</b>		
City <b>Providence</b>	State <b>RI</b>	Zip <b>02903</b>	City <b>Providence</b>	State <b>RI</b>	Zip <b>02903</b>
8. UNPAID <input type="checkbox"/> 9. UNDEPOSITED 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
			75,000	NoPar	

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.

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.

03/28/2012

Signature of Authorized Representative

Date

**Michael Integlia, III**

Print or Type Name of Authorized Representative

**FILED**

MAR 28 2012

By DS  
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