



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 2013

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. 136339		2. Exact name of the Corporation MMS INVESTMENTS, INC.			
3. Principal office address 65 Fox Ridge Drive			City Cranston	State RI	Zip 02921
4. Business Phone No. 401-944-2829		5. State of Incorporation Rhode Island			
6. Brief description of the character of business conducted in Rhode Island The purchase, sale and rental of real estate and any other lawful business.					
President Name Margaret M. Scaralia			Vice-President Name Albert J. Scaralia		
Street Address same as above			Street Address same as above		
City	State	Zip	City	State	Zip
Secretary Name Albert J. Scaralia			Treasurer Name Margaret M. Scaralia		
Street Address same as above			Street Address same as above		
City	State	Zip	City	State	Zip
DIRECTORS (NAMES AND ADDRESSES) (SEE BOX FOR ATTACHMENT)					
Director Name None			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
SHARES AUTHORIZED (SEE BOX FOR ATTACHMENT)					
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	
		200	Common	No Par Value	

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 SECRETARY OF STATE
 CORPORATIONS DIV

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

MAR 12 2013

BY [Signature]
 29-192391

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.

Margaret M. Scaralia 1/27/13
 Signature of Authorized Representative Date

Margaret M. Scaralia, President

Print or Type Name of Authorized Representative