

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 2016

		This report must be typ LE THIS REPORT BY M		LT IN A \$25.00 PF	NAI TY FFF	
. Entity ID No.	·	ne of the Corporation	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	27 117 12 12 13 12		
105754	1	LEITE HOLDINGS, INC.				
3. Principal office address 260 SOUTH COUNTY TRAIL			City EXETER	State RI	Zip 02822	
4. Business Phone No. 401-556-1054			5. State of Incorporation Rhode Island			
•	ALES, LEASIN	conducted in Rhode Island G, MAINTENANCE A		ALL TYPES OF	REAL ESTATE IN	
LIST ALL OFFICERS (NAMES AND ADDR	esses) ("X" Box for A	DAGINERTO -		Singer product of the Land of the Control of the Co	
President Name MARY R. LEITE			Vice-President Name MARY R. LEITE			
Street Address 260 SOUTH COUNTY TRAIL			Street Address 260 SOUTH COUNTY TRAIL			
ity EXETER	State RI	Zip 02822	City EXETER	State RI	Zip 02822	
Secretary Name MARY R. LEITE			Treasurer Name MARY R. LEITE			
Street Address 260 SOUTH COUNTY TRAIL			Street Address 260 SOUTH COUNTY TRAIL			
ity EXETER	State RI	Zip 02822	City EXETER	State RI	Zip 02822	
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rector Name NARY R. LEITE			Director Name			
Street Address 260 SOUTH COUNTY TRAIL			Street Address			
ity EXETER	State RI	Zip 02822	City	State	Zip	
Director Name			Director Name			
Street Address			Street Address			
ity	State	Zip	City	State	Zip	
SHARES AUTHORIZED			10. BHARES ISSUED (*	"X" BOX FOR ATTA	CHMENT)	
			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	
nis information is currently of record in the Office of the Secretary State. Changes require an additional filing. See Section 9 of instruction sheet.			100 No Par Value	A	None	
his report must be execu		corporation by an authorized to be executed on behalf of			ds of a receiver or trustee,	
File Date		n de executed on bendh of	Under penalty of perj	ury, I declare and at any accompanying	firm that I have examined schedules and statements, are true and correct.	
Check No	o kore ere ere	Eli en		سـ ال		
By:		FILED	100		ine 2-12.	
FOR SECRETARY OF STATE USE ONLY FEB 1 8 2016			Signature of Authorized Representative Date MARY R. LEITE			
rm No. 630 vised: 01/2012	RV	KL 6619	Print or Type Name of	Authorized Represer	ntative	