

**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

2016

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

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.

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|--|-------------|--|---|--------------------------------|--------------|
| 1. Entity ID No. 7697 | | 2. Exact name of the Corporation Marquis-Charrette Realty Inc | | | |
| 3. Principal office address 209 Coe Street | | City Woonsocket | | State RI | Zip 02895 |
| 4. Business Phone No. 401-769-7388 | | 5. State of Incorporation RI | | | |
| 6. Brief description of the character of business conducted in Rhode Island Real Estate | | | | | |
| 7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) | | | | | |
| President Name Doris M. Charrette | | | Vice President Name Monique A. Charrette | | |
| Street Address 209 Coe Street | | | Street Address 209 Coe Street | | |
| City Woonsocket | State RI | Zip 02895 | City Woonsocket | State RI | Zip 02895 |
| Secretary Name Doris M. Charrette | | | Treasurer Name Monique A. Charrette | | |
| Street Address 209 Coe Street | | | Street Address 209 Coe Street | | |
| City Woonsocket | State RI | Zip 02895 | City Woonsocket | State RI | Zip 02895 |
| 8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) | | | | | |
| Director Name Doris M. Charrette | | | Director Name Monique A. Charrette | | |
| Street Address 209 Coe Street | | | Street Address 209 Coe Street | | |
| City Woonsocket | State RI | Zip 02895 | City Woonsocket | State RI | Zip 02895 |
| Director Name Doris M. Charrette | | | Director Name Monique A. Charrette | | |
| Street Address 209 Coe Street | | | Street Address 209 Coe Street | | |
| City Woonsocket | State RI | Zip 02895 | City Woonsocket | State RI | Zip 02895 |
| 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) | | | | | |
| NUMBER OF SHARES 100 | | CLASS/SERIES Common | | PAR VALUE without 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.

File Date _____

Check No. _____

By: _____

FOR SECRETARY OF STATE USE ONLY

FILED**MAR 16 2016**

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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.

Doris M. Charrette

Signature of Authorized Representative

3/13/16

Date

DORIS M. CHARRETTE

Print or Type Name of Authorized Representative