



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**

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. 73726		2. Exact name of the Corporation DSG Realty Corp.			
3. Principal office address 2032 Plainfield Pike		City Cranston	State RI	Zip 02921	
4. Business Phone No. 401-223-4400		5. State of Incorporation Rhode Island			
6. Brief description of the character of business conducted in Rhode Island Buying, selling and dealing in improved and unimproved real estate.					
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) ☐					
President Name Sidney I. Goldman			Vice-President Name David N. Goldman		
Street Address 2032 Plainfield Pike			Street Address 2032 Plainfield Pike		
City Cranston	State RI	Zip 02921	City Cranston	State RI	Zip 02921
Secretary Name Dona L. Goldman			Treasurer Name Sidney I. Goldman		
Street Address 2032 Plainfield Pike			Street Address 2032 Plainfield Pike		
City Cranston	State RI	Zip 02921	City Cranston	State RI	Zip 02921
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) ☐					
Director Name Sidney I. Goldman			Director Name Dona L. Goldman		
Street Address 2032 Plainfield Pike			Street Address 2032 Plainfield Pike		
City Cranston	State RI	Zip 02921	City Cranston	State RI	Zip 02921
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" 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
			3,000	Common	0

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

Form No. 630
Revised: 01/2012

FILED

MAR 30 2016

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A.A.

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.

Sidney I. Goldman 3/29/16
Signature of Authorized Representative Date

Sidney I. Goldman
Print or Type Name of Authorized Representative