



State of Rhode Island and Providence Plantations
 Department of State - Business Services Division

148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040 | Email: corporations@sos.ri.gov | Website: www.sos.ri.gov

Amended

RECEIVED
 SECRETARY OF STATE
 CORPORATIONS DIV

2016 MAY 17 AM 9:18

Profit Corporation Annual Report for the year: 2016

Filing period: January 1 - March 1

Filing Fee: \$50.00 *FAILURE TO FILE THIS REPORT BY MARCH 31 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID Number		2. Exact name of the Corporation	
132024		Ed+Matt Realty INC	
3. Principal Office Address		City	State
27 Commerce ST		Greenville	RI
		Zip	02828
4. Business Phone Number		5. State of Incorporation	
401-949-6850		Rhode Island	
6. Brief description of the character of business conducted in Rhode Island			
Real Estate Investment			
7. List ALL officers (names and addresses)			Check the box to indicate an attachment <input type="checkbox"/>
President Name		Vice-President Name	
Matthew Borden		Christopher Borden	
Street Address		Street Address	
361 Seaview Ave		33 Kennedy Rd	
City	State	City	State
SWANSEA	MA	FOSTER	RI
Zip	02777	Zip	02825
Secretary Name		Treasurer Name	
Alexander Borden		Alexander Borden	
Street Address		Street Address	
155 Foster Center Rd		155 Foster Center Rd	
City	State	City	State
FOSTER	RI	FOSTER	RI
Zip	02825	Zip	02825
8. List ALL directors (names and addresses)			Check the box to indicate an attachment <input type="checkbox"/>
Director Name		Director Name	
Street Address		Street Address	
City		City	
State		State	
Zip		Zip	
9. Shares Authorized		10. Shares Issued	
This information is currently of record in the Department of State. Changes require an additional filing.		NUMBER OF SHARES	CLASS/SERIES
		4000	
			PAR VALUE
11. 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.			
Name of Authorized Representative			Date
Matthew Borden			5/17/16
Signature of Authorized Representative			
<i>Matthew Borden</i>			

SIGN DOCUMENT HERE

FILED

MAY 17 2016

BY *CM* 9:18



State of Rhode Island and Providence Plantations
Department of State | Office of the Secretary of State
Nellie M. Gorbea, *Secretary of State*

I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island
and Providence Plantations, hereby certify that this document, duly executed in
accordance with the provisions of Title 7 of the General Laws of Rhode Island, as
amended, has been filed in this office on this day:

A handwritten signature in blue ink, appearing to read "Nellie M. Gorbea". The signature is fluid and cursive, written in a professional style.

Nellie M. Gorbea
Secretary of State

