




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

Annual Report for the year: 2017  
Corporation

- Filing period: January 1 - March 1  
→ Filing Fee: \$50.00  
→ Penalty: Additional \$25.00 fee if form is not filed by April 1.

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R.I. DEPT. OF STATE  
BUS SVCS DIV

2017 AUG 25 PM 2:23

1. Entity ID Number <b>000071942</b>		2. Exact name of the Corporation <b>S &amp; F REALTY, INC.</b>	
3. Principal Office Address <b>1880 KINGSTOWN RD</b>		City <b>SOUTH KINGSTOWN</b>	State <b>RI</b>
		Zip <b>02883</b>	
4. NAICS Code <b>53</b>	6. Brief description of the character of business conducted in Rhode Island <b>TO OWN, LEASE, SELL AND MANGE REAL ESTATE</b>		
5. State of Incorporation <b>RI</b>			
7. List ALL officers (names and addresses) <span style="float:right">Check the box to indicate an attachment <input type="checkbox"/></span>			
President Name <b>ABU ALI SINA NIKKHAH</b>		Vice-President Name <b>FAHREERAZI NIKISHAH</b>	
Street Address <b>236 COWSETT RD</b>		Street Address <b>45 CHERRY RD</b>	
City <b>WARWICK</b>	State <b>RI</b>	City <b>KINGSTON</b>	State <b>RI</b>
Zip <b>02886</b>		Zip <b>02881</b>	
Secretary Name <b>ABU ALI SINA NIKKHAH</b>		Treasurer Name	
Street Address <b>236 COWSETT RD</b>		Street Address	
City <b>WARWICK</b>	State <b>RI</b>	City	State
Zip <b>02886</b>		Zip	
8. List ALL directors (names and addresses) <span style="float:right">Check the box to indicate an attachment <input type="checkbox"/></span>			
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
9. Shares Authorized		10. Shares Issued <span style="float:right">Check the box to indicate an attachment <input type="checkbox"/></span>	
This information is currently of record in the Department of State.  Changes require an additional filing.		NUMBER OF SHARES	CLASS/SERIES
		<b>600</b>	<b>CNP</b>
		PAR VALUE	<b>0.00</b>
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. <b>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.</b>			
Name of Authorized Representative <b>ABU ALI SINA NIKKHAH</b>		Date <b>08.25.17</b>	
Signature of Authorized Representative 		<b>FILED</b>	

AUG 25 2017

BY CU 311097