

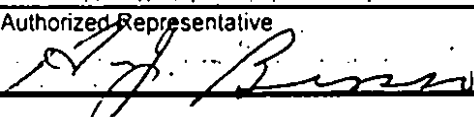


State of Rhode Island and Providence Plantations
Department of State - Business Services Division

Annual Report for the year: **2018**
Corporation

STAMP

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

1. Entity ID Number 307289		2. Exact name of the Corporation Brosco Real Estate Management, Inc.			
3. Principal Office Address 312 South Main Street			City Providence	State RI	Zip 02903
4. NAICS Code 53110		6. Brief description of the character of business conducted in Rhode Island Real estate management.			
5. State of Incorporation Rhode Island					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name A.J. Brosco			Vice-President Name Dino A. Brosco		
Street Address 312 South Main Street			Street Address 312 South Main Street		
City Providence	State RI	Zip 02903	City Providence	State RI	Zip 02903
Secretary Name Angela Brosco			Treasurer Name A.J. Brosco		
Street Address 312 South Main Street			Street Address 312 South Main Street		
City Providence	State RI	Zip 02903	City Providence	State RI	Zip 02903
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name A.J. Brosco, Esq.			Director Name Dino A. Brosco, Esq.		
Street Address 312 South Main Street			Street Address 312 South Main Street		
City Providence	State RI	Zip 02903	City Providence	State RI	Zip 02903
Director Name Angela Brosco			Director Name		
Street Address 312 South Main Street			Street Address		
City Providence	State RI	Zip 02903	City	State	Zip
9. Shares Authorized			10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>		
This information is currently of record in the Department of State. Changes require an additional filing.			NUMBER OF SHARES		
			CLASS/SERIES		
			PAR VALUE		
			Common		
			No 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 A.J. Brosco					Date 1-12-18
Signature of Authorized Representative 					

SIGN DOCUMENT HERE

FILED

JAN 19 2018

BV