RI SOS Filing Number: 201858193360 Date: 2/9/2018 4:00:00 PM

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

FILED.

Annual Report for the year: 2018 Corporation

→ Filing period: January 1 - March 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by April 1.

VILL FEB 0 9 2018

BY 14506 1. Entity ID Number 2. Exact name of the Corporation 1669593 DAOU REALTY MANAGEMENT, INC. 3. Principal Office Address City State Zip One Wayland Avenue, Unit 101 North **Providence** RI 02906 4. NAICS Code 6. Brief description of the character of business conducted in Rhode Island 53 11 10 Real estate management. State of Incorporation Rhode Island 7. List ALL officers (names and addresses) Check the box to indicate an attachment President Name Georges H. Daou Vice-President Name Street Address
One Wayland Avenue, Unit 101 North Street Address State RI City Providence City State Zip ^{Zip}02906 Secretary Name Georges H. Daou Treasurer Name Georges H. Daou Street Address
One Wayland Avenue, Unit 101 North Street Address
One Wayland Avenue, Unit 101 North State RI State RI City Providence Zip 02906 ^{Zip} 02906 City Providence 8. List ALL directors (names and addresses) Check the box to indicate an attachment 🔲 Director Name Director Name Street Address Street Address City State City State Zip Zip Director Name Director Name Street Address Street Address State Zip 9. Shares Authorized 10. Shares Issued Check the box to indicate an attachment This information is currently of record in the NUMBER OF SHARES CLASS/SERIES Department of State. 100 Common No Par Value Changes require an additional filing. 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 8/66/10 Georges H. Daou SUIDLES - 8 TH 8:30 socrates County . Signature of Authorized Representative

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov SECENTED STATES VIOLENCE OF VI

FORM 630 - Revised: 10/2017