



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

STAMP

FOR
 SECRETARY OF STATE
 USE ONLY

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.

1. Entity ID Number 000107658		2. Exact name of the Corporation Fatima Realty, Inc.				
3. Principal Office Address 119 East Main Street			City West Warwick	State RI	Zip 02893	
4. NAICS Code 531110		6. Brief description of the character of business conducted in Rhode Island Real Estate, Realty				
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 Tariq Mahmud			Vice-President Name Tariq Mahmud			
Street Address 12 College Lane			Street Address 12 College Lane			
City Barrington	State RI	Zip 02806	City Barrington	State RI	Zip 02806	
Secretary Name Tariq Mahmud			Treasurer Name Tariq Mahmud			
Street Address 12 College Lane			Street Address 12 College Lane			
City Barrington	State RI	Zip 02806	City Barrington	State RI	Zip 02806	
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	State	Zip	City	State	Zip	
Director Name			Director Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
9. Shares Authorized 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.		10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>				
		NUMBER OF SHARES		CLASS/SERIES		PAR VALUE
		1000		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 Tariq Mahmud					Date	
Signature of Authorized Representative <i>[Signature]</i>						

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MAIL TO:
 Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040
 Website: www.sos.ri.gov