



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

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 <u>10155</u>		2. Exact name of the Corporation <u>Ser Vis Realty Inc.</u>			
3. Principal Office Address <u>260 Rosemont Avenue</u>		City <u>Johnston</u>		State <u>R.I.</u>	Zip <u>02919</u>
4. NAICS Code <u>531110</u>		6. Brief description of the character of business conducted in Rhode Island <u>To Own and Lease Real Estate Property</u>			
5. State of Incorporation <u>Rhode Island</u>					
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐					
President Name <u>Pasco M. DiBiasio</u>			Vice President Name <u>Richard E. DiBiasio</u>		
Street Address <u>196 Scituate Avenue</u>			Street Address <u>15B Needham Street</u>		
City <u>Johnston</u>	State <u>R.I.</u>	Zip <u>02919</u>	City <u>Johnston</u>	State <u>R.I.</u>	Zip <u>02919</u>
Secretary Name <u>Nancy Stravato</u>			Treasurer Name <u>Pasco M. DiBiasio</u>		
Street Address <u>260 Rosemont Avenue</u>			Street Address <u>196 Scituate Avenue</u>		
City <u>Johnston</u>	State <u>R.I.</u>	Zip <u>02919</u>	City <u>CRANSTON</u>	State <u>R.I.</u>	Zip <u>02919</u>
8. List ALL directors (names and addresses) Check the box to indicate an attachment ☐					
Director Name <u>NONE</u>			Director Name <u>NONE</u>		
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			10. Shares Issued Check the box to indicate an attachment ☐		
This information is currently of record in the Department of State.			NUMBER OF SHARES		
<u>100 Comm</u>			<u>18</u>		
Changes require an additional filing. <u>No Par</u>			CLASS/SERIES		
			<u>Common</u>		
			PAR VALUE		
			<u>No Par</u>		
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 <u>Nancy Stravato</u>					Date <u>2/7/2018</u>
Signature of Authorized Representative <u>Nancy Stravato</u>					

SIGN DOCUMENT HERE

FILED

FEB 13 2018

BY

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