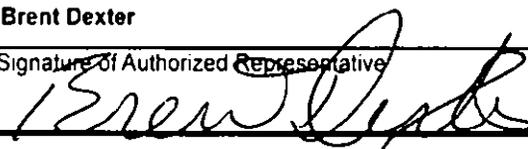




State of Rhode Island and Providence Plantations  
**Department of State - Business Services Division**

**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 <b>7126</b>		2. Exact name of the Corporation <b>Dexter Investment Corp.</b>					
3. Principal Office Address <b>70 Waterman Avenue</b>		City <b>East Providence</b>	State <b>RI</b>	Zip <b>02914</b>			
4. NAICS Code <b>53110</b>		6. Brief description of the character of business conducted in Rhode Island <b>Real estate investment</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>Brent Dexter</b>			Vice-President Name <b>Brent Dexter</b>				
Street Address <b>195 Riverside Drive</b>			Street Address <b>195 Riverside Drive</b>				
City <b>Riverside</b>	State <b>RI</b>	Zip <b>02915</b>	City <b>Riverside</b>	State <b>RI</b>	Zip <b>02915</b>		
Secretary Name <b>Brent S. Dexter</b>			Treasurer Name <b>Kirk Dexter</b>				
Street Address <b>122 Allerton Avenue</b>			Street Address <b>35 Shore Drive</b>				
City <b>East Providence</b>	State <b>RI</b>	Zip <b>02914</b>	City <b>Warren</b>	State <b>RI</b>	Zip <b>02885</b>		
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>							
Director Name <b>Brent Dexter</b>			Director Name <b>Kirk Dexter</b>				
Street Address <b>195 Riverside Drive</b>			Street Address <b>35 Shore Drive</b>				
City <b>Riverside</b>	State <b>RI</b>	Zip <b>02915</b>	City <b>Warren</b>	State <b>RI</b>	Zip <b>02885</b>		
Director Name			Director Name				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
9. Shares Authorized							
This information is currently of record in the Department of State.  Changes require an additional filing.		10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
		NUMBER OF SHARES		CLASS/SERIES		PAR VALUE	
		1000		Comm		No Par	
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>Brent Dexter</b>				Date <b>2/8/2018</b>			
Signature of Authorized Representative 				<b>FILED</b> <b>FEB 20 2018</b> BY <u>3236</u>			
SIGN DOCUMENT HERE							

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