



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.

RECEIVED STATE
SECRETARY OF
CORPORATIONS
2018 FEB 27 AM 10:47

1. Entity ID Number 136339		2. Exact name of the Corporation MMS INVESTMENTS, INC.			
3. Principal Office Address 65 Fox Ridge Drive		City Cranston		State RI	Zip 02921
4. NAICS Code 531210		6. Brief description of the character of business conducted in Rhode Island The purchase, sale and rental of real estate and any other lawful business.			
5. State of Incorporation Rhode Island					
7. List ALL officers (names and addresses). Check the box to indicate an attachment ☐					
President Name Margaret M. Scaralia			Vice-President Name Albert J. Scaralia		
Street Address 65 Fox Ridge Drive			Street Address 65 Fox Ridge Drive		
City Cranston	State RI	Zip 02921	City Cranston	State RI	Zip 02921
Secretary Name Albert J. Scaralia			Treasurer Name Margaret M. Scaralia		
Street Address 65 Fox Ridge Drive			Street Address 65 Fox Ridge Drive		
City Cranston	State RI	Zip 02921	City Cranston	State RI	Zip 02921
8. List ALL directors (names and addresses). Check the box to indicate an attachment ☐					
Director Name None			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 ☐					
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 ☐		
NUMBER OF SHARES			CLASS/SERIES		PAR VALUE
200			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. <i>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.</i>					
Name of Authorized Representative Margaret M. Scaralia, President					Date January 22, 2018
Signature of Authorized Representative <i>Margaret M. Scaralia</i>					
SIGN DOCUMENT HERE					FILED

FEB 27 2018

BY *325326*