RI SOS Filing Number: 201859605150 Date: 3/1/2018 4:00:00 PM

1000	

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: 2018 Corporation

STAMP

FOR SECRETARY OF STATE USE O'NLY

→ Filing period: January 1 - March 1

1. Entity ID Number 32596		2 Exact name of the Corporation Integrated Properties IV, Inc.						
Principal Office Address 1414 Atwood Avenue			City Johnston	·		Zip 02919		
4. NAICS Code	6. Brief desc	ription of the chara	cter of business of	conducted in Rhode	Island			
531390	To Improve	To Improve, Manage and Operate Real Property						
5. State of Incorporation								
RI								
7. List ALL officers (names a	and addresses)			Chec	k the box to i	ndicate an attachment 🗆		
President Name Alfred Carpi	Vice-President Name Alfred Carpionato							
Street Address 1414 Atwood	l Avenue		Street Addres	s 1414 Atwood Ave	nue			
City Johnston	State RI	Zip 02919	City Johnston		State RI	Zip 02919		
Secretary Name			Treasurer Name					
Street Address			Street Address					
City	State	7 ₁ p	City		State	Zip		
8. List ALL directors (names	and addresses)		l	Chec	k the box to i	I ndicate an attachment 🗀		
Director Name			Director Name					
Street Address			Street Address					
Sileet Address	ice: Addiess			Suect voluess				
City	State	Zıp	City		State	Zip		
Director Name			Director Name					
Street Address			Street Address					
City	State	Zip	City		State	Zıp		
9. Shares Authorized	<u> </u>	10 Shares Is:			eck the box to indicate an attachment			
This information is currently of record in the Department of State.		NUMBER OF SHARES		CLASS/SERIES		PAR VALUE		
				Common		No Par Value		
Changes require an additiona	ıl filing.							
11. This report must be executivistee, this report must be executive.					oration is in	the hands of a receiver or		
Under penalty of perjury, I	declare and affirm	that I have examir	ned this report, i		mpanying s	chedules and		
<i>statements, and that all st</i> Name of Authorized Represe		l herein are true ai	nd correct.		Date			
Alfred Carpionato		1 -				2/28/18		
Signature of Authorized Rep	presentative	JUGN DO	CUMENT HERE	FILED	57.			
<u>() </u>	The second	4	7	MAR 0 1 2018				

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.n.gov