



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Edward S. Inman, III, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401.222.3040

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2005

Filing Period: September 1 - November 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. ID No. *101408*		2. Exact name of the limited liability company MIKE AND NESTOR REAL ESTATE COMPANY, LLC			
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island REAL ESTATE			
5. Principal office address 606 RESERVOIR AVENUE		City CRANSTON	State RI	Zip 02910	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name MICHAEL GIOURAS		Contact Title MEMBER			
Street Address 606 RESERVOIR AVENUE		City CRANSTON	State RI	Zip 02910-	
7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE FILL IN SPACES BEFORE USING ATTACHMENTS ("X" BOX FOR ATTACHMENT) ☒ - ANY MODIFICATIONS TO MANAGERS REQUIRES FILING OF AMENDMENT. R.I.G.L. 7-16-12(a)(2) / 7-16-52					
Manager Name		Manager Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
Manager Name		Manager Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER: Changes require filing of Form 642 - R.I.G.L. 7-16-11					
Agent Name MARK E. LIBERATI, ESQ.		Address 1536 WESTMINSTER STREET			
Address		City PROVIDENCE	Zip 02909		

This report must be signed in ink by an authorized person pursuant to 7-16-66.



* 1 0 1 4 0 8 *

101408 DLLC10/7/024/27:00 PM	
File Date	9/29/05
Check No.	3053
By:	ch
FOR SECRETARY OF STATE USE ONLY	

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.

Signature of Authorized Person
Date 9/21/2005
Michael Giouras, Member
Print or Type Name of Authorized Person



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Edward S. Innian, III, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401.222.3040

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2004

Filing Period: September 1 - November 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. ID No. *101408*		2. Exact name of the limited liability company MIKE AND NESTOR REAL ESTATE COMPANY, LLC			
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island REAL ESTATE			
5. Principal office address 606 RESERVOIR AVENUE		City CRANSTON	State RI Zip 02910		
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name MICHAEL GIOURAS		Contact Title MEMBER			
Street Address 606 RESERVOIR AVENUE		City CRANSTON	State RI Zip 02910		
7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE FILL IN SPACES BEFORE USING ATTACHMENTS ("X" BOX FOR ATTACHMENT) ☐ ANY MODIFICATIONS TO MANAGERS REQUIRES FILING OF AMENDMENT. R.I.G.L. 7-16-12 (a) (2) / 7-16-52					
Manager Name		*Manager Name			
Street Address		*Street Address			
City	State	Zip	City	State	Zip
Manager Name		*Manager Name			
Street Address		*Street Address			
City	State	Zip	City	State	Zip
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 642 - R.I.G.L. 7-16-11					
Agent Name MARK E. LIBERATI, ESQ.			Address 1536 WESTMINSTER STREET		
Address			City PROVIDENCE	Zip 02909	

This report must be signed in ink by an authorized person pursuant to 7-16-66.



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101408 DLLC10/7/024:27:00 PM	
File Date	12/6/04
Check No.	2738
By:	MA
FOR SECRETARY OF STATE USE ONLY	

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.

Signature of Authorized Person: Michael Giouras Date: 11/2/2004
Michael Giouras, Member
Print or Type Name of Authorized Person



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Edward S. Inman, III, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401.222.3040

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2003

Filing Period: September 1 - November 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. ID No. *101408*		2. Exact name of the limited liability company MIKE AND NESTOR REAL ESTATE COMPANY, LLC	
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island REAL ESTATE	
5. Principal office address 606 RESERVOIR AVENUE		City CRANSTON	State RI Zip 02910
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name MICHAEL GIOURAS		Contact Title MEMBER	
Street Address 606 RESERVOIR AVENUE		City CRANSTON	State RI Zip 02910-
7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE. FILL IN SPACES BEFORE USING ATTACHMENTS ("X" BOX FOR ATTACHMENT) ☐ ANY MODIFICATIONS TO MANAGERS REQUIRES FILING OF AMENDMENT, R.I.G.L. 7-16-12 (a) (2) / 7-16-52			
Manager Name		Manager Name	
Street Address		Street Address	
City	State	Zip	City
Manager Name		Manager Name	
Street Address		Street Address	
City	State	Zip	City
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER. Changes require filing of Form 642, R.I.G.L. 7-16-11.			
Agent Name MARK E. LIBERATI, ESQ.		Address 1536 WESTMINSTER STREET	
Address		City PROVIDENCE	Zip 02909

This report must be signed in ink by an authorized person pursuant to 7-16-66.



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101408 DLLC10/7/024:27:00 PM
File Date 10-13-03
Check No. 2440
By: [Signature]
FOR SECRETARY OF STATE USE ONLY

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.

Signature of Authorized Person: [Signature] Date: 9/12/2003
Michael Giouras, Member
Print or Type Name of Authorized Person



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Edward S. Inman, III, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401.222.3040

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2002

Filing Period: September 1 - November 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. ID No. *101408*		2. Exact name of the limited liability company MIKE AND NESTOR REAL ESTATE COMPANY, LLC	
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island REAL ESTATE	
5. Principal office address 606 RESERVOIR AVENUE		City CRANSTON	State RI Zip 02910
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name MICHAEL GIOURAS		Contact Title MEMBER	
Street Address 606 RESERVOIR AVENUE		City CRANSTON	State RI Zip 02910-
7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE FILL IN SPACES BEFORE USING ATTACHMENTS ("X" BOX FOR ATTACHMENT) ☐ ANY MODIFICATIONS TO MANAGERS REQUIRES FILING OF AMENDMENT. R.I.G.L. 7-16-12 (a) (2) / 7-16-52			
Manager Name		Manager Name	
Street Address		Street Address	
City	State	Zip	City
Manager Name		Manager Name	
Street Address		Street Address	
City	State	Zip	City
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 642 - R.I.G.L. 7-16-11			
Agent Name MARK E. LIBERATI, ESQ.		Address 1536 WESTMINSTER STREET	
Address		City PROVIDENCE	Zip 02909

This report must be signed in ink by an authorized person pursuant to 7-16-66.



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101408 DLLC10/7/024:27:00 PM
File Date <u>10-17-02</u>
Check No. <u>2206</u>
By: <u>Michael Giouras</u>
FOR SECRETARY OF STATE USE ONLY

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.

Michael Giouras 10/11/2002
Signature of Authorized Person Date
Michael Giouras, Member
Print or Type Name of Authorized Person

Filing Fee: \$50.00

To be filed annually between
September 1 and November 1



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Corporations Division
100 North Main Street Providence, Rhode Island 02903-1335
Telephone (401) 222-3040

LIMITED LIABILITY COMPANY

ID Number DLLC 101408

Annual Report for the year 2001

1. The name of the limited liability company is:

MIKE & BRANKO REAL ESTATE COMPANY, LLC

2. The address of the principal office of the limited liability company is:

606 Reservoir Avenue, Cranston, RI 02910

3. The state or other jurisdiction under the laws of which it is formed is RHODE ISLAND

4. The name and address of its resident agent is: MARK E. LIBERATI, ESQ.

1536 WESTMINSTER STREET PROVIDENCE RI 02909

5. The current mailing address of the limited liability company and the name or title of a person to whom communications may be directed are: Michael Giouras, 606 Reservoir Avenue, Cranston, RI 02910

6. A brief statement of the character of the business in which the limited liability company is actually engaged in this state: real estate

7. If the limited liability company has managers, the name and address of each manager of the limited liability company

Name	Address

Dated

8/31/01



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.

MIKE & BRANKO REAL ESTATE COMPANY, LLC

Exact Name of Limited Liability Company

By

Michael Giouras
Member

President
Title

FOR SECRETARY OF STATE USE ONLY

File Date:

9-4-01

Check No.:

1888

By:

[Signature]

Form No. 632
Revised 01/99

DETACH BOTTOM BEFORE RETURNING

Please detach and mail the above section including payment in the amount of \$50.00 made payable to Secretary of State. If the registered office and/or registered agent indicated below has changed, Form 642 must be filed in this office. Forms may be

**To be filed annually between
September 1 and November 1**



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Corporations Division
100 North Main Street Providence, Rhode Island 02903-1335
Telephone (401) 222-3040

ID Number **DLIC 101408**

Annual Report for the year 2000

1. The name of the limited liability company is:
MIKE & BRANKO REAL ESTATE COMPANY, LLC
2. The address of the principal office of the limited liability company is:
606 Reservoir Avenue, Cranston, RI 02910
3. The state or other jurisdiction under the laws of which it is formed is RHODE ISLAND
4. The name and address of its resident agent is: MARK E. LIBERATI, ESQ.
1536 WESTMINSTER STREET PROVIDENCE RI 02909
5. The current mailing address of the limited liability company and the name or title of a person to whom communications may be directed are: Michael Giouras, 606 Reservoir Avenue, Cranston, RI 02910
6. A brief statement of the character of the business in which the limited liability company is actually engaged in this state: real estate
7. If the limited liability company has managers, the name and address of each manager of the limited liability company
- | <i>Name</i> | <i>Address</i> |
|-------------|----------------|
| <u></u> | <u></u> |
| <u></u> | <u></u> |

Dated Sept. 7, 2000



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.

MIKE & BRANKO REAL ESTATE COMPANY, LLC
Exact Name of Limited Liability Company

By

Michael Giouras
Member

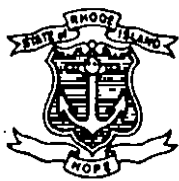
Tide

Form No. 632
Revised 01/99

PAID
FOR SECRETARY OF STATE USE ONLY
File Date: **SEP 11 2000**
Check No.: **SEC'Y OF STATE**
By:

Filing Fee: \$50.00

To be filed annually between
September 1 and November 1



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Corporations Division
100 North Main Street Providence, Rhode Island 02903-1335
Telephone (401) 222-3040

LIMITED LIABILITY COMPANY

ID Number LL 101408

Annual Report for the year 1999

1. The name of the limited liability company is:

MIKE & BRANKO REAL ESTATE COMPANY, LLC

2. The address of the principal office of the limited liability company is:

606 Reservoir Avenue, Cranston, RI 02910

3. The state or other jurisdiction under the laws of which it is formed is RHODE ISLAND

4. The name and address of its resident agent is: MARK E. LIBERATI, ESQ.

1536 WESTMINSTER STREET PROVIDENCE, RI 02909

5. The current mailing address of the limited liability company and the name or title of a person to whom communications may be directed are: Michael Giouras, Member

606 Reservoir Avenue, Cranston, RI 02910

6. A brief statement of the character of the business in which the limited liability company is actually engaged in this state: real estate

7. If the limited liability company has managers, the name and address of each manager of the limited liability company

Name

Address

Dated Sept 6, 1999



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.

MIKE & BRANKO REAL ESTATE COMPANY, LLC

Exact Name of Limited Liability Company

By

Michael Giouras
Member

Title

President

FOR SECRETARY OF STATE USE ONLY

File Date: 9-10-99

Check No.: 1345

By: AMF

Form No. 632
Revised 01/99