

Matthew A. Brown, Secretary of State Corporations Division 100 North Main Street, Providence, RJ 02903-1335 401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005 Filing Period: January 1 - March 1 Filing Fee: \$50.00

(FORM MUST BE TYPE					
1. Corporate 1D No.	2. Name of Corpo			·	
85309	POJAC RE	ALIY,ING.			
3. Street Address Principe 15 Amflex Dri			City	State	Zip
4. Business Phone No.	<u>ve</u>	1.0	Cranston	RI	02921
(401) 943-068	.0	5. State of Incorpor			6. SIC Code
		RHODE ISLA	NNU		5710
To own, improve	e Character of Business Con , develop, buy or	sell property i			
8. NAMES AND ADI President Name	DRESSES OF THE OF	FICERS ("X" BOX FOR	RATTACHMENT) FILL IN S	PACES BEFORE USING A	ттасиментя
Robert A. Rote	ndo		None		
Street Address			Street Address	· · · · · · · · · · · · · · · · · · ·	
15 Amflex Driv	re		•		
City	State	Zip	City	State	Zip
Cranston	RI	02921	•		,
Secretary Name	_		Treasurer Name	• • • • • • • • • • • • •	· · · <i>l ·</i> · · · · · · · · ·
Robert A. Roto	mdo		Robert A. Roto	ndo	
Street Address			'Street Address		
15 Amflex Driv	'e		.15 Amflex Driv	e	
Ciry	State	Zip	City	State	Zip
Cranston	RI	02921	. Cranston	RI	02921
9. NAMES AND ADI	RESSES OF THE DIR	ECTORS ("X" BOX FO	OR ATTACHMENT) , FILL IN	SPACES BEFORE USING	ATTACHMENTS
Director Name		_	Director Name		The State of the S
None		•	•		
Street Address			· Street Address		· · · · · · · · · · · · · · · · · · ·
City	State	Zip	·City	State	Ta:
- •		,	·	Siare	Zip
Director Name Street Address			Director Name Street Address		
City	State	Zip	.City	State	Ζίρ
10. SHARES AUTHO	RIZED ("X" BOX FOR	ATTACHMENT).	11 SHAPES ISSUED /#	X!! BOX FOR ATTACIIMEN	· · · · · · · · · · · · · · · · · · ·
AUTHORIZED SHARES			ISSUED SHARES	A. BUA PUKAI IACIINIEN	U U may district
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
8,000 \$0.01 PAR V	ALUE 		100	Common	No Par Value
					
inis report must be s	signed in ink by eithe	er the President, Vice	President, Secretary, Assi	istant Secretary, Treasi	irer, Receiver or Trustee
81 (8)81 81	IEB 11111 SE11E 181				
	: 8 6 7				
8 5	188 1101 8810 181 3 0 9		[ladas manalan af		
	_			rjury, I declare and affirm g any accompanying sched	
	=11 =1)	 -	mis report, mercan	its contained herein are tru	ivies and statements,
	1 Interior		und diat arrange (1)	and committee in the int	cand correct.
File Date	AR 9-3-2005	~ ∱			3/18/00
W (53Ψ	Signature of Officer)ate
Check No.	<u> </u>	-	Røbert A. F	Rotundo	
By_		/	Print or Type Name of		<u> </u>
Β <u>γ</u> :	_	-	President	-	
FOR SECRETARY OF ST	TATE USE ONLY		Title of Officer		
		1	rine oj Officer		Form 630 12/01



FOR SECRETARY OF STATE USE ONLY

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Matthew A. Brown, Secretary of State

Corporations Division 100 North Main Street Providence, RI 02903-1335 401-222,3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004 Filing Period: January 1 - March 1 Filing Fee: \$50.00 (FORM MUST BE TYPED OR PRINTED IN BLACK) 1. Corporate ID No. 2. Name of Corporation 85309 POJAC REALTY, INC. 3. Street Address Principal Business Office State ZID 15 Amflex Drive Cranston RI 02921 4. Business Phone No. 5. State of Incorporation 6. SIC Code <u>401-943-0680</u> RHODE ISLAND 5710 7. Brief Description of the Character of Business Conducted in Rhode Island TO OWN, IMPROVE, DEVELOP, BUY, OR SELL PROPERTY IN RI. Vice President Name Robert A. Rotondo Street Address Street Address <u> 15 Amflex Drive</u> State Zίρ State Zip Cranston Treasurer Name Robert A. Rotondo Robert A. Rotondo Street Address Sircet Address 15 Amflex Drive <u> 15 Amflex Drive</u> City State State Cranston RI 02921 Cranston RI 9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS Street Address Street Address State Zip City ZID Director Name Director Name Street Address Street Address State Z.ip City State Zip 10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) □ **AUTHORIZED SHARES** ISSUED SHARES Number of Shares Class/Series Par Value Number of Shares Class/Series Par Value 8,000 \$.01 PAR VALUE 100 common no par value This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, 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 tale and correct File Date Signature of Officer Date Robert A. Rotondo Print or Type Name of Officer

President

Title of Officer

(FORM MUST BE TYPED OR PRINTED IN BLACK)

Edward S. Inman, III, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003 Filing Period: January 1-March 1 • Filing Fee: \$50.00

1. Corporate ID No.	2. Name of Corpora	ition			
85309	POJAC REA	ALTY, INC.			
3. Street Address Principal Business		•	City	State	ZIp
15 Amflex Dri 4. Business Phone No.	ive	5. State of Incorpora	Cranston	RI	02921 6. sic Code
401-943-0680 7. Brief Description of the Characte	r of Business Conducted	RHODE ISL	AND		5710
To own, improves. NAMES AND ADDRES	ve, develop, SSES OF THE OFF	buy or sell pr ICERS ("x" BOX FOR A	operty in Rhode Isl TTACHMENT) FILLIN SPACE Vice President Name	and . S BEFORE USING ATTAC	HMENTS
Robert A. Rotor	ndo		- Street Address		
15 Amflex Driv	10 State	Zip	. City	. State	Zip
Cranston Secretary Name	RI	. 02921	Treasurer Name		
Robert A. Roto	ondo		Robert A. Ros	tondo	
15 Amflex Dri	.Ve State	Zip	15 Amflex Dri	ive State	Zip
Cranston 9. NAMES AND ADDRES Director Name	RI SES OF THE DIR	02921. ECTORS (*x* BOX FOR	· Craston ATTACHMENT) FILL IN SPA	RI CES BEFORE USING ATTA	02921 ACHMENTS
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZE AUTHORIZED SHARES	D ("X" BOX FOR ATT	ACHMENT)	11. SHARES ISSUED ISSUED SHARES	(*X* BOX FOR ATTACHMENT)
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
8,000 \$.01 PAR VALUE			100	common	\$.01

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

	* 8 5 3 0 9 *
ile Dote:	5-23.03
iheck No.:	હ્ય
OR SECRETARY O	SE STATE LISE 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 Officer

Robert A. Rotondo

President

Title of Officer

Form (30 12/02



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

401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002 Filling Period: January 1-March 1 • Filling Fee: \$50.00

(FORM MUST BE TYPED IN BL)	ICK)				
1. Corporate ID No.	2. Name of Corpor	atlon	•		
85309		ealty, Inc.			
3. Street Address Principal Business	Office		City	State	Zip
15 Amflex Drive 4. Business Phone No.		S. State of Incorpor	Cranston ation	RI	02921 6. sic code
(401) 943-0639 T. Brief Description of the Characte	r of Business Conducted	Rhode Is in Rhode Is	land		5710
To own, improve, B. NAMES AND ADDRES President Name	develop, business of the off	y or sell prop TCERS (*X* BOX FOR A	perty in Rhode Islan TTACHMENT) FILLIN SPACE Vice President Name	d. ES BEFORE USING ATTA	CHMENTS
Robert A. Rotond	0		: Street Address		
15 Amflex Drive	State	Zip	City	Stale	Zip
Cranston	RI	02921	Treasurer Name		
Robert A. Rotond	0		Robert A. Rot	ondo	
treet Address					
15 Amflex Drive			15 Amflex Dri	ve	
15 Amflex Drive	State RI	zı _r 02921	Cranston	State RI	zıp 02 9 21
15 Amflex Drive Oranston NAMES AND ADDRES Director Name	RI	02921	Cranston	State	02921
15 Amflex Drive Cranston NAMES AND ADDRES	RI	02921	City Cranston ATTACHMENT) FILL IN SPA	State RI	02921
15 Amflex Drive Ity Cranston NAMES AND ADDRES Itector Name	RI	02921	City Cranston ATTACHMENT) FILL IN SPA	State RI	02921
15 Amflex Drive City Cranston D. NAMES AND ADDRES Director Name	RI SES OF THE DIR	02921 ECTORS (*x* BOX FOR	City Cranston ATTACHMENT) FILL IN SPA Director Name Street Address	State RI CES BEFORE USING ATT	02921 FACHMENTS
15 Amflex Drive	RI SES OF THE DIR	02921 ECTORS (*x* BOX FOR	City Cranston ATTACHMENT) FILL IN SPA Director Name Street Address City	State RI CES BEFORE USING ATT	02921 FACHMENTS
15 Amflex Drive Clay Cranston P. NAMES AND ADDRES Placetor Name Street Address Placetor Name Creet Address	RI SES OF THE DIR	02921 ECTORS (*x* BOX FOR	City Cranston ATTACHMENT) FILL IN SPA Director Name Street Address City Director Name	State RI CES BEFORE USING ATT	02921 FACHMENTS
15 Amflex Drive City Cranston D. NAMES AND ADDRES Director Name Street Address	RI SES OF THE DIR State	02921 ECTORS (*x* BOX FOR Zip 	City Cranston ATTACHMENT) FILL IN SPA Director Name Street Address City Director Name Street Address	State RI CES BEFORE USING ATT State	02921 TACHMENTS ZIP Zip
15 Amflex Drive City Cranston NAMES AND ADDRES Director Name City Director Name	RI SES OF THE DIR State	02921 ECTORS (*x* BOX FOR Zip 	City Cranston ATTACHMENT) FILL IN SPA Director Name Street Address City Director Name Street Address City 11. SHARES ISSUED	State RI CES BEFORE USING ATT State	02921 TACHMENTS ZIP Zip

	Under penalty of perjury, I declare and affirm th	
	this report, including any accompanying schedu	les and statements, and
0 11 0-0	that all statements contained herein are true and	1 correct.
File Date:		
Theek No.:1638	Signature of Officer	3/1/02 Date
<i>h</i>	Robert A. Rotondo	
$f(\mathcal{W})$	Print or Type Name of Officer	
OR SECRETARY OF STATE USE ONLY	President	
	Title of Officer	
	€ > 5	Farm 630 17/01

Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001 Filing Period: January 1-March 1 • Filing Fee: \$50.00

STOP PLEASE READ INVIRUCTIONS

(FORM MUST BE TYPED IN BLACK)	
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1. Corporate ID No. 309

2. Name of Compression Y, INC.

3. Street Address Principal Bo 15 Amilex Drive	usiness Office		City Cranston	State RI	^{ZI} P 02921
4. Business Phone No. 401-943-0680		S. State of Incorpor. RHODE IS	ation LAND		^{6.} \$7°C
7. Brief Description of the Ch Real estate	naracter of Business Conducted	in Rhode Island			
8. NAMES AND ADI President Name	DRESSES OF THE OF	FICERS (*X* BOX FOR A	TTACHMENT) X FILL IN SPACE	ES BEFORE USING ATTA	CHMENTS
Robert A. Rotond	o .		Joann Rotondo Street Address		
15 Amflex Dr			15 Amflex Drive		
City	State	ZIp	City	State	Zip
Cranston	RJ	02921	Cranston	RI	02921
Secretary Name			Treasurer Name		•
Robert A. Rotond	o, Jr.		Gina Rotondo		
Street Address			Street Address		
15 Amflex Drive	C4-+-	94.	15 Amflex Drive	_	
Cranston	State RI	716 02921	City Cranston	, ştate R1	02821
NAMES AND ADD	ORESSES OF THE DIR	PECTODS (eve nov ro	· · · · · · · · · · · · · · · · · · ·	CEC DEPODE HOMA LED	
Director Name	ACCOUNT OF THE DIR	ECIONS (X BOX PO)	Director Name	CES BEFORE USING ATT	ACHMENIS
Street Address			Street Address	·	
City	State	Zip	City	State	Zip
Director Name			Director Name	•	
treet Address			Street Address		
Sity	State	Zip	City	State	Zip
10. SHARES AUTHOI	RIZED ("X" BOX FOR AT	FACHMENT)	11. SHARES ISSUED	(*X* BOX FOR ATTACHMENT	r) .
lumber of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
8,000 SHS \$.0	D1 PAR VALUE		100.00	Common Stock	\$.01

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



By: ______
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 porcet.

Signature of Officer

Robert A. Rotondo

of Type Name of Officer

Type ideact

Title of Officer

- /-- ----

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001

Additional Information Sheet

Pojac Realty, Inc.

Corporate ID No:

85309

8. NAME AND ADDRESSES OF THE OFFICERS (con't.)

Name	Address	Title	
Christopher Rotondo .	15 Amflex Drive Cranston, RI 02921	Assistant Secretary	
Joseph Smith	15 Amflex Drive Cranston, RI 02921	Assistant Secretary	



James R. Langevin, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000

STOP PLASE READ INSTRUCTIONS

Filing Period:	January 1-March 1	 Filing Fee: \$50.00 	9		INSTR
(FORM MUST BE TYI	PED IN BLACK)				
I. Corporate ID No. 85309	2. Name of Corp	Pojac Realty, Inc	.		
3. Street Address Princi, 15 Amflex D	pal Business Office		city Cranston	State RI	zıp 0292°
1. Business Phone No. 401-943-06	80	5. State of Incorporati Rhode			6. SIC Code 571 (
7. Brief Description of t Real estate	the Character of Business Conduct	ed in Rhode Island		•	
3. NAMES AND resident Name Rotondo, Ro		FFICERS ("X" BOX FOR AT	TACHMENT) / FILL IN SPACES B Vice President Name Rotondo, Joann	EFORE USING ATTACE	IMENTS
itreet Address 15 Amflex Dr	r		Street Address 15 Amflex Drive		
Cranston	State RI	zip 02921	chy Cranston	State RI	^{Zip} 02921
ecretary Name Rotondo, Jr.,	, Robert A.		Treasurer Name Rotondo, Gina		
treet Address 15 Amflex Dr	rive		Street Address 15 Amflex Drive		
Cranston	State RI	^{Zip} 02921	Cranston	State RI	^{Zip} 02921
O. NAMES AND Director Name	ADDRESSES OF THE DI	RECTORS ('X' BOX FOR ,	ATTACHMENT) FILL IN SPACES Director Name	S BEFORE USING ATTA	CHMENTS
treet Address			Street Address		
City	State	Zip	City	State	Zip
Director Name	•		Director Name	• • • •	
treet Address			Street Address		
City	State	Zip	City	State	Zip
O. SHARES AUT	HORIZED (*X* BOX FOR A	TTACHMENT)	11. SHARES ISSUED (*)	(* BOX FOR ATTACHMENT)	
Number of Shares	Class/Series Common	Par Value	Number of Shares	Class/Series Common	Par Value
8,000.00	Stock	\$.01	100.00	Stock	\$.01

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

	11	00. 11.1 75 7 no pay	this report, including any	I declare and affirm that I have examined accompanying schedules and statements, and ned herein are true and correct.
File Date:	4-10-00	——————————————————————————————————————	V STATE	-20
Check No.:	1010	BIATS TO STRUCT	Signature of Officer	Date
By:	AmE	GENECENED	Print or Type Name of Officer	KOTONOO
	OF STATE USE ONLY		THE of Officer	ENT.

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000

Additional Information Sheet

Pojac Realty, Inc.

Corporate ID No: 85309

8. NAMES AND ADDRESSES OF THE OFFICERS (con't.)

Name .	inthesi	Tills
Rotondo, Christopher	15 Amflex Drive	Assistant Secretary
	Cranston, RI 02921	
Smith, Joseph	15 Amflex Drive	Assistant Secretary
	Cranston, RI 02921	



James R. Langevin, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-277-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1999

Filing Period: Janua	try I-March 1 •	Filing Fee: \$50.00		-	INSTRUCTIONS	
(FORM MUST BE TYPED IN I	BLACK					
1. Corporate ID No. 85309	2. Name of Corporation	jac Realty, Inc.				
3. Street Address Principal Busin	ness Office	· · · · · · · · · · · · · · · · · · ·	City	State	Zip	
15 Amflex Drive	•	•	Cranston	RI	02921	
4. Business Phone No.		S. State of Incorporation)n		6. SIC Code	
401-943-0680 Rhode			sland		5710	
7. Brief Description of the Chara	octer of Business Conducted in	Rhode Island			•	
8. NAMES AND ADDR	ESSES OF THE OFFIC	ERS ("X" BOX FOR ATT	ACHMENT)	(1)		
President Name			Vice President Name	y •		
Rotondo, Robert A	\ .		Rotondo, Joann		· · · · · · · · · · · · · · · · · · ·	
Street Address 15 Amflex Dr	,		Street Address 15 Amflex Drive		•	
City	State	Zip	City	State	Zip	
Cranston	RI		Cranston	RI	02921	
Secretary Name 1	********		Treasurer Name			
Rotondo, Jr., Robe	ert A.	•	Rotondo, Gina			
Street Address 15 Amflex Drive	•		Street Address 15 Amflex Drive			
City	State	Zip	City	State	Zip	
Cranston	RI	02921	Cranston	RI	02921	
9. NAMES AND ADDR	ESSES OF THE DIRE	CTORS ("X" BOX FOR A	TTACHMENT)			
Director Name	•	. •	Director Name			
Street Address			Street Address	•		
Clty	State	Zip	City	State	Zip -	
City	Jiait .	E P	Cny			
Director Name	li		Director Name	······································		
	•		·	•	•	
Street Address			Street Address			
•	•		.	•	į	
City .	State	Zip	City	State	Zip	
			<u> </u>			
10. SHARES AUTHORI	ZED ("X" BOX FOR ATTA	CHMENT) .	11. SHARES ISSUED	("X" BOX FOR ATTACHMENT) <u>L</u>	
AUTHORIZED SHARES		· · · · · · · · · · · · · · · · · · ·	ESSUED SHARES	·		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value	
	ommon	•		Common		
8.000.00 St	tock *	\$.01	100,00	Stock	\$.01	

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

	Under penalty of perjury, I declare and affirm that I have examined
	this report, including any accompanying schedules and statements,
File Date: FILED	that all statements contained herein are true and correct.
Check No.: FEB 1 0 1999	Signature of Officer BOTONDO
By: BY AND	Print or Type Name of Officer 1745 1 den +
TON SICHEING OF SINGLE ONE OF	Title of Officer

and statements, and orrect.

ATTACHMENT TO 1999 ANNUAL REPORT

SECTION 1:

CORPORATE ID NUMBER:

85309

SECTION 2:

NAME OF CORPORATION:

POJAC REALTY, INC.

SECTION 3:

NAMES AND ADDRESSES OF THE OFFICERS:

CHRISTOPHER ROTONDO ASSISTANT SECRETARY

15 AMFLEX DRIVE

CRANSTON, RHODE ISLAND 02921

JOSEPH SMITH JR.

ASSISTANT SECRETARY

15 AMFLEX DRIVE

CRANSTON, RHODE ISLAND 02921



James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335 401-277-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1998 Filing Period: January 1-March 1 • Filing Fee: \$50.00

	i	EALTY, INC.						
3. Street Address Principal Business	Office		City	State	! Zip			
15 AMFLEX DRIV	E		CRANSTON	RI	02921			
4. Business Phone No. 401.943.0680 State of Incorporation RHODE ISLAN			ก็ที่D		6. SIC Code 5710			
7 Rrief Description of the Characte elsewhere, and incorporated u	to transac nder the RI	ed in Rhode Island To own tany or all oth Business Corpor	; improve, develop er lawful business ation Act, as the	, buy, for sell r for which corpo same may be amer	property in RI a grations may be ided from time t			
8. NAMES AND ADDRES				time herea	fter (the "Act"			
President Name			Vice President Name					
ROBERT A. ROTO	NDO		JOANN ROTONDO					
Street Address 15 AMFLEX DRIV	E		Street Address 15 AMFLEX DRIV	E				
City	State	Zip	City	State	Zip			
CRANSTON	RI	02921	CRANSTON	RI	02921			
Secretary Name			Treasurer Name					
ROBERT A. ROTO	NDO, JR.		GINA ROTONDO	····				
Street Address 15 AMFLEX DRIVE			Street Address 15 AMFLEX DRIV	Street Address 15 AMFLEX DRIVE				
City	State	Zip	City	State	Zip			
CRANSTON	RI	02921	CRANSTON	RI	02921			
9. NAMES AND ADDRES Director Name NONE	SES OF THE D	IRECTORS (*x* BOX FOR A	ATTACHMENT) O Director Name NONE	······································	·			
Street Address			Street Address					
City	State	Zip ·	City	State	Zip .			
Director Name NONE	i		Director Name NONE					
Street Address		Street Address						
			Street Address					
Cliy	State	Zip	City	State	Zip			
10. SHARES AUTHORIZE	D ("X" BOX FOR A	TTACHMENT)	· · ·	("X" BOX FOR ATTACHMEN	VT) [
AUTHORIZED SHARES			ISSUED SHARES					
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Por Value			
8,000 SHS \$.01 PAR VALUE		NONE						
		,			+			
			ce President, Secretary, As	 				

* 8 5 3 0 9 *	Under penalty of perjury, I declare and affirm that I have examined
1 24 98 19825	this report, including any accompanying schedules and statements, and that all statements contained berein are true and correct. 1-19-98
DR SECRETARY OF STATE USE ONLY	Print of Type Name of Officer PRES 19 ENT Title of Officer

ATTACHMENT TO 1998 ANNUAL REPORT

SECTION 1: CORPORATE ID NUMBER: 85309

SECTION 2: NAME OF CORPORATION: POJAC REALTY, INC.

SECTION 8: NAMES AND ADDRESSES OF THE OFFICERS:

CHRISTOPHER ROTONDO ASSISTANT SECRETARY

15 AMFLEX DRIVE CRANSTON, RI 02921

JOSEPH SMITH, JR.

ASSISTANT SECRETARY

15 AMFLEX DRIVE CRANSTON, RI 02921



James R. Langevin, Secretary of State Corporations Division 100 North Main Street, Providence, Rt 02903-1335 401-277-3040

PROFIT CORPORATION ANNUAL REPORT 1997

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.

2. Name of Corporation

85309

Number of Shares

8,000 SHS \$.01 PAR VALUE

POJAC REALTY, INC.

3. Street Address Principal Business Off	lice				City		State		Zip	
15 AMFLEX DRIVE					C	RANSTON		RI		02921
4. Business Phone No.			5. State	of incorporation					6. SIG	Code
943.0680			RH	ODE ISLAND					57	'10
7. Brief Description of the Character of ELSEWHERE, AND TO INCORPORATED UNDE 8. NAMES AND ADDRESSE President Name ROBERT A. ROTONDO	S OF T	E KI BOZIN	E55	CORPORATION	AC ENT)	E, DEVELOP, BUY, L BUSINESS FOR W I, AS THE SAME M President Name JOANN ROTONDO	OR SI HICH (AY BE	ELL PROPER CORPORATIO AMENDED F	TY NS 1 ROM	IN RI AND MAY BE TIME TO TIME.
Street Address					Street	Address				
15 AMFLEX DRIVE						15 AMFLEX DRIVE				
^{City} CRANSTON	State	RI	Zip 0	2921	City	CRANSTON	State	RI	Zip	02921
Secretary Name ROBERT A. ROTONDO	, JR	•			Treasu	GINA ROTONDO				
Street Address 15 AMFLEX DRIVE					Street	Address 15 AMFLEX DRIVE				
CRANSTON	State	RI	ZIp	02921	Clly	CRANSTON	State	RI	Zip	02921
9. NAMES AND ADDRESSE Director Name	S OF T	THE DIRECTO)RS (*)	K" BOX FOR ATTACH		F) or Name				
Street Address					Street	Address				
Спу	State		Zip		City		State		Ζίρ	
Director Name	•				Direct	or Name				
Street Address					Street	Address				
City	State		Zip		City		State		2.1p	
10. SHARES AUTHORIZED	AND 1	ISSUED (*x* 80	OX FOR	ATTACHMENT)						
AUTHORIZED SHARES					ISSUEE	SHARES				

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

Number of Shares

NONE

PRESIDENT

Title of Officer

	* 8 5 3 0 9 *
File Date:	3/10/97
Check No.:	1015
By:	DE STATE USE ONLY

Class/Series

Par Value

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.

3-5-97

Signature of Officer

Date

ROBERT A. ROTONDO

Print of type Name of Officer

Class/Series

Par Value

ATTACHMENT TO 1997 ANNUAL REPORT

SECTION 1: CORPORATE ID NUMBER: 85309

SECTION 2: NAME OF CORPORATION: POJAC REALTY, INC.

SECTION 8: NAMES AND ADDRESSES OF THE OFFICERS:

CHRISTOPHER ROTONDO ASSISTANT SECRETARY

15 AMFLEX DRIVE CRANSTON, RI 02921

JOSEPH SMITH, JR.

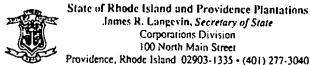
ASSISTANT SECRETARY

15 AMFLEX DRIVE

CRANSTON, RI 02921

PROFIT CORPORATION ANNUAL REPORT

1996



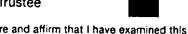
State of Rhode Island and Providence Plantations James R. Langevin, Secretary of State Corporations Division 100 North Main Street

Filing Period: January 1-March 1 Filing Fee: \$50.00

PLEASE TYPE OR PRINT IN BLACK INK. 1. CORPORATE ID NO. 2. NAME OF CORPORATION 85309 POJAC REALTY, INC. 3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE STATE ZIP (200) 15 Amflex Drive Cranston R.I. 02921 4 BUSINESS PHONE NO. 5 STATE OF INCORPORATION SIC CODE RHODE ISLAND 943.0680 TO OWN, improve, develop, buy, or sell property in RI and elsewhere, and to transact any or all other lawful business for which corporations may be incorporated under the RI business corporation act, as the same may be amended from time to time 8. NAMES AND ADDRESSES OF THE OFFICERS PRESIDENT NAME __Robert_A._Rotondo_ STREET ADORESS 15 Amflex Drive ZIP C006 arv STATE ZIP COOE Cranston R.I. 02921 SECRETARY NAME TREASURER HAME STREET ADDRESS STREET ADDRESS ZIP CODE ZD COOE AHD ADDRESSES OF THE DIRECTORS DIRECTOR NAME DIRECTOR NAME STREET ADDRESS STREET ADDRESS CITY STATE ZIP CODE air STATE ZIP CODE DIRECTOR NAME DIRECTOR NAME STREET ADDRESS STREET ADDRESS STATE ; and ZIP COOS STATE ZP 000E 10. SHARES AUTHORIZED **AUTHORIZED SHARES ISSUED SHARES** NUMBER OF SHARES CLASS / SERIES PAR VALLE NUMBER OF SHARES QASS/SERTES PAR VALUE 8,000 SHS \$.01 PAR VALUE none This report must be SIGNED IN INK by either the

President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

Title of Officer



	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.
File Date: 43 10 5/1/16	Signature of Officer
Check No: 1012	ROBERT A ROTONOU Print or Type Name of Officer
By CC	TRESIDENT 2-29-96

For Secretary of State Use Only

and correct. ONDU