



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 2005

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

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 73712		2. Name of Corporation JIRA REALTY INC.		
3. Street Address Principal Business Office 361 Neptune Avenue		City North Babylon	State NY	Zip 11704
4. Business Phone No. 516-661-8300		5. State of Incorporation RHODE ISLAND		6. SIC Code 8888
7. Brief Description of the Character of Business Conducted in Rhode Island TO OWN AND MANAGE REAL ESTATE.				
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS				
President Name Robert Devine		Vice President Name James B. Glen		
Street Address 28 Maple Avenue		Street Address 43 Anchor Drive		
City Bayshore	State NY	Zip 11706	City Massapequa	State NY
Secretary Name Howard Goldsmith		Treasurer Name Joan E. Flaxman		
Street Address 71 Woodland Drive, South		Street Address 200 Sterling Road		
City South Kingstown	State RI	Zip 02879	City Harrison	State NY
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS				
Director Name Robert Devine/Stuart Pivar		Director Name James B. Glen		
Street Address 28 Maple Avenue/15 W. 67 th Street		Street Address 43 Anchor Drive		
City Bayshore/New York	State NY	Zip 11706/10023	City Harrison	State NY
Director Name Howard Goldsmith		Director Name Joan E. Flaxman		
Street Address 71 Woodland Drive, South		Street Address 200 Sterling Road		
City South Kingstown	State RI	Zip 02879	City Harrison	State NY
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
2,000 NO PAR VALUE			500	Common
				No Par

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



FILED

File Date

MAR 18 2005

Check No.

By

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 correct.

Signature of Officer

Robert Devine
Print or Type Name of OfficerPresident
Title of Officer



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. 73712		2. Name of Corporation JIRA REALTY INC.			
3. Street Address Principal Business Office			City	State	Zip
4. Business Phone No. 516-661-8300		5. State of Incorporation RHODE ISLAND			6. SIC Code 8888
7. Brief Description of the Character of Business Conducted in Rhode Island TO OWN AND MANAGE REAL ESTATE.					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Robert Devine			Vice President Name James B. Glen		
Street Address 28 Maple Avenue			Street Address 43 Anchor Drive		
City Bayshore	State NY	Zip 11706	City Massapequa	State NY	Zip 11758
Secretary Name Howard Goldsmith			Treasurer Name Joan E. Flaxman		
Street Address 71 Woodland Drive, South			Street Address 200 Sterling Road		
City South Kingstown	State RI	Zip 02879	City Harrison	State NY	Zip 10528
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Robert Devine/Stuart Pivar			Director Name James B. Glen		
Street Address 28 Maple Avenue/15 W. 67 th Street			Street Address 43 Anchor Drive		
City Bayshore/New York	State NY	Zip 11706/10023	City Harrison	State NY	Zip 10528
Director Name Howard Goldsmith			Director Name Joan E. Flaxman		
Street Address 71 Woodland Drive, South			Street Address 200 Sterling Road		
City South Kingstown	State RI	Zip 02879	City Harrison	State NY	Zip 10528
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
2,000 NO PAR VALUE			500	Common	No Par

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



* 7 3 7 1 2 *

File Date	2-23-04
Check No.	403
By:	HP
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 Officer

Robert Devine
Print or Type Name of Officer

President
Title of Officer



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the 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

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No.

73712

2. Name of Corporation

JIRA REALTY INC.

3. Street Address Principal Business Office

361 Neptune Avenue

City

North Babylon

State

NY

Zip

11704

4. Business Phone No.

516-661-8300

5. State of Incorporation

RHODE ISLAND

6. SIC Code

8888

7. Brief Description of the Character of Business Conducted in Rhode Island

To own and manage real estate.

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT)

FILL IN SPACES BEFORE USING ATTACHMENTS

President Name

Vice President Name

Robert Devine

James B. Glen

Street Address

Street Address

28 Maple Avenue

43 Anchor Drive

City

Bayshore

State

NY 11706

Zip

City

Massapequa, NY 11758

State

Zip

Secretary Name

Treasurer Name

Howard Goldsmith

Joan E. Flaxman

Street Address

Street Address

71 Woodland Drive, South

200 Sterling Road

City

South Kingstown,

State

RI 02879

Zip

City

Harrison, NY 10528

State

Zip

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT)

FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

Director Name

Robert Devine/Stuart Pivar

James B. Glen

Street Address

Street Address

28 Maple Avenue/15 W. 67th Street

43 Anchor Drive

City

Bayshore/New York

State

NY 11706/10023

Zip

City

Harrison, NY 10528

State

Zip

Director Name

Director Name

Howard Goldsmith

Joan E. Flaxman

Street Address

Street Address

71 Woodland Drive, South

200 Sterling Road

City

South Kingstown

State

RI 02879

Zip

City

Harrison, NY 10528

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

2,000 NO PAR VALUE

500

Common

No Par

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



* 7 3 7 1 2 *

File Date: 2/3/03

Check No.: 353

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 Officer

Date

Robert Devine

Print or Type Name of Officer

President

Title of Officer

3

Form 630 12/02



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



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **73712** 2. Name of Corporation **JIRA REALTY INC.**

3. Street Address Principal Business Office

361 Neptune Avenue

4. Business Phone No.

516-661-8300

5. State of Incorporation

RHODE ISLAND

City

North Babylon

State

NY

Zip

11704

6. SIC Code

8888

7. Brief Description of the Character of Business Conducted in Rhode Island

To own and manage real estate.

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name

Robert Devine

Street Address **128 WATERS EDGE**

~~28 Maple Avenue~~

City **JUPITER**

State

FL

Zip

33477

Secretary Name

Howard Goldsmith

Street Address

71 Woodland Drive, South

City

South Kingstown, RI 02879

Vice President Name

James B. Glen

Street Address

~~43 Anchor Drive~~

131 ROUND SWAMP RD

City

WEST HILLS

State

NY

Zip

11743

Treasurer Name

Joan E. Flaxman

Street Address

200 Sterling Road

City

Harrison, NY 10528

State

Zip

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) **FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name

Robert Devine/Stuart Pivar

Street Address **AS ABOVE**

~~28 Maple Avenue~~ **/15 W. 67th Street**

City

~~Bayshore~~ **New York NY 10061**

Director Name

Howard Goldsmith

Street Address

71 Woodland Drive, South

City

South Kingstown RI 02879

Director Name

James B. Glen

Street Address

~~43 Anchor Drive~~

131 ROUND SWAMP RD

City

WEST HILLS

State

NY

Zip

11743

Director Name

Joan E. Flaxman

Street Address

200 Sterling Road

City

Harrison, NY 10528

State

Zip

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

2,000 NO PAR VALUE

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES

Number of Shares

Class/Series

Par Value

500

Common

No Par

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



* 7 3 7 1 2 *

File Date: **2-28-02**

Check No.: **297**

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 Officer

Date

Robert Devine

Print or Type Name of Officer

President

Title of Officer

[Signature]

Form 630 12/01



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

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **73712** 2. Name of Corporation **JIRA REALTY INC.**

3. Street Address Principal Business Office **361 Neptune Avenue** City **North Babylon** State **NY** Zip **11704**

4. Business Phone No. **516-661-8300** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **8888**

7. Brief Description of the Character of Business Conducted in Rhode Island
To own and manage real estate.

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name **Robert Devine** Vice President Name **James B. Glen**

Street Address **28 Maple Avenue** Street Address **43 Anchor Drive**

City **Bayshore** State **NY** Zip **11706** City **Massapequa** State **NY** Zip **11758**

Secretary Name **Howard Goldsmith** Treasurer Name **Joan E. Flaxman**

Street Address **71 Woodland Drive, South** Street Address **200 Sterling Road**

City **South Kingstown** State **RI** Zip **02879** City **Harrison** State **NY** Zip **10528**

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name **Robert Devine/Stuart Pivar** Director Name **James B. Glen**

Street Address **28 Maple Avenue/15 W. 67th Street** Street Address **43 Anchor Drive**

City **Bayshore/New York** State **NY** Zip **11706/10023** City **Harrison** State **NY** Zip **10528**

Director Name **Howard Goldsmith** Director Name **Joan E. Flaxman**

Street Address **71 Woodland Drive, South** Street Address **200 Sterling Road**

City **South Kingstown** State **RI** Zip **02879** City **Harrison** State **NY** Zip **10528**

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES

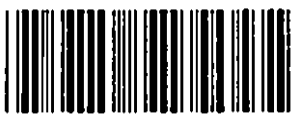
Number of Shares	Class/Series	Par Value
2,000 SHS	NO	PAR VALUE

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES

Number of Shares	Class/Series	Par Value
500	Common	No Par

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



* 7 3 7 1 2 *

File Date: 3/2

Check No.: 248

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 Officer [Signature]
Robert Devine

Print or Type Name of Officer
President

Title of Officer

Date 2/27/01



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

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

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **73712** 2. Name of Corporation **JIRA REALTY INC.**
3. Street Address Principal Business Office **361 Neptune Avenue** City **North Babylon** State **NY** Zip **11704**
4. Business Phone No. **516-661-8300** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code

7. Brief Description of the Character of Business Conducted in Rhode Island
To own and manage real estate.

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name Robert Devine Street Address 28 Maple Avenue City Bayshore State NY Zip 11706 Secretary Name Howard Goldsmith Street Address 71 Woodland Drive, South City South Kingstown State RI Zip 02879	Vice President Name James B. Glen Street Address 43 Anchor Drive City Massapequa State NY Zip 11758 Treasurer Name Joan E. Flaxman Street Address 200 Sterling Road City Harrison State NY Zip 10528
---	---

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name Robert Devine/Stuart Pivar Street Address 28 Maple Avenue/15 W. 67th Street City Bayshore/New York State NY Zip 11706/10023 Director Name Howard Goldsmith Street Address 71 Woodland Drive, South City South Kingstown State RI Zip 02879	Director Name James B. Glen Street Address 43 Anchor Drive City Harrison State NY Zip 10528 Director Name Joan E. Flaxman Street Address 200 Sterling Road City Harrison State NY Zip 10528
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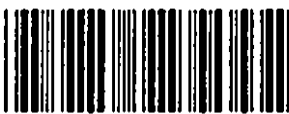
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES		
Number of Shares	Class/Series	Par Value
2,000 SHS NO PAR VALUE		

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES		
Number of Shares	Class/Series	Par Value
500	Common	No Par

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



* 7 3 7 1 2 *

File Date: 2/18/00
Check No.: 175
By: C

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] 2/15/00
Signature of Officer Date

Robert Devine
Print or Type Name of Officer

President
Title of Officer



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

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 **1999**

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

(FORM MUST BE TYPED IN BLACK)



1. Corporate ID No. 73712		2. Name of Corporation JIRA REALTY INC.			
3. Street Address Principal Business Office 361 Neptune Avenue		City North Babylon	State NY		
4. Business Phone No. 516-661-8300		5. State of Incorporation RHODE ISLAND	6. SIC Code 0000		
7. Brief Description of the Character of Business Conducted in Rhode Island To own and manage real estate.					
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Robert Devine		Vice President Name James B. Glen			
Street Address 28 Maple Avenue		Street Address 43 Anchor Drive			
City Bayshore, NY	State NY	City Massapequa, NY	State NY		
Zip 11706		Zip 11758			
Secretary Name Howard Goldsmith		Treasurer Name Joan E. Flaxman			
Street Address 47 Sweetbriar Drive		Street Address 200 Sterling Road			
City Cranston, RI	State RI	City Harrison, NY	State NY		
Zip 02920		Zip 10528			
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Robert Devine/Stuart Pivar		Director Name James B. Glen			
Street Address 28 Maple Avenue/15 W. 67th Street		Street Address 43 Anchor Drive			
City Bayshore/New York	State NY	City Massapequa, NY	State NY		
Zip 11706/10023		Zip 11758			
Director Name Howard Goldsmith		Director Name Joan E. Flaxman			
Street Address 47 Sweetbriar Drive		Street Address 200 Sterling Road			
City Cranston, RI	State RI	City Harrison, NY	State NY		
Zip 02920		Zip 10528			
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
2,000 SHS NO PAR VALUE			500	Common	No Par

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



* 7 3 7 1 2 *

File Date: 1/16/99

Check No.: 965

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 Officer

Date

Robert Devine

Print or Type Name of Officer

President

Title of Officer



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

James H. 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

(FORM MUST BE TYPED IN BLACK)



1. Corporate ID No.

73712

2. Name of Corporation

JIRA REALTY INC.

3. Street Address Principal Business Office

361 Neptune Avenue

4. Business Phone No.

516-661-8300

5. State of Incorporation

RHODE ISLAND

City

No. Babylon

State

NY

Zip

11704

7. Brief Description of the Character of Business Conducted in Rhode Island

To own and manage real estate.

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT)

President Name

Robert Devine

Street Address

28 Maple Avenue

City

Bayshore

State

NY

Zip

11706

Secretary Name

Howard Goldsmith

Street Address

47 Sweetbriar Drive

City

Cranston

State

RI

Zip

02920

Vice President Name

James B. Glen

Street Address

43 Anchor Drive

City

Massapequa

State

NY

Zip

11758

Treasurer Name

Joan E. Flaxman

Street Address

200 Sterling Road

City

Harrison

State

NY

Zip

10528

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT)

Director Name

Robert Devine/Stuart Pivar

Street Address

28 Maple Avenue/15 W. 67th Street

City

Bayshore/New York

State

NY

Zip

11706/10023

Director Name

James B. Glen

Street Address

43 Anchor Drive

City

Massapequa

State

NY

Zip

11758

Director Name

Joan E. Flaxman

Street Address

200 Sterling Road

City

Harrison

State

NY

Zip

10528

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

2,000 SHS NO PAR VALUE

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES

Number of Shares

Class/Series

Par Value

500

Common

No Par

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



* 7 3 7 1 2 *

File Date: 3/9

Check No.: 0852

By: RD

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 Officer

Robert Devine
Print or Type Name of Officer

President
Title of Officer

Date

3/9/98



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

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 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.

73712

2. Name of Corporation

JIRA REALTY INC.

3. Street Address Principal Business Office

361 Neptune Avenue

4. Business Phone No.

516-661-8300

5. State of Incorporation

RHODE ISLAND

City

No. Babylon

State

NY

Zip

6. SIC Code 11704

7. Brief Description of the Character of Business Conducted in Rhode Island

To own and manage real estate.

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT)

President Name

Robert Devine

Street Address

28 Maple Avenue

City

Bayshore

State

NY

Zip

11706

Secretary Name

Howard Goldsmith

Street Address

47 Sweetbriar Drive

City

Cranston

State

RI

Zip

02920

Vice President Name

James B. Glen

Street Address

43 Anchor Drive

City

Massapequa

State

NY

Zip

11758

Treasurer Name

Joan E. Flaxman

Street Address

200 Sterling Road

City

Harrison

State

NY

Zip

10528
~~02916~~

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT)

Director Name

Robert Devine/Stuart Pivar

Street Address

28 Maple Avenue/15 W. 67th Street

City

Bayshore/New York

State

NY

Zip

11706/10023

Director Name

James B. Glen

Street Address

43 Anchor Drive

City

Massapequa

State

NY

Zip

11758

Director Name

HOWARD GOLDSMITH

Street Address

47 SWEETBARIAR DR.

City

CRANSTON

State

RI

Zip

02920

Director Name

JOAN E. FLAXMAN

Street Address

200 STERLING RD

City

HARRISON

State

NY

Zip

10528

10. SHARES AUTHORIZED AND ISSUED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

2,000 SHS NO PAR VALUE

ISSUED SHARES

Number of Shares

Class/Series

Par Value

500

Common

No Par

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



* 7 3 7 1 2 *

File Date:

4/5/97

Check No.:

791

By:

GPA

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 Officer

Robert Devine

President
Title of Officer

Date

4/10/97

ANNUAL REPORT

1996



James R. Langevin, Secretary of State
Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335 • (401) 277-3040

Filing Period: January 1-March 1

Filing Fee: \$50.00

PLEASE TYPE OR PRINT IN BLACK INK.

1. CORPORATE ID NO. 73712		2. NAME OF CORPORATION JIRA REALTY INC.	
3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE 361 Neptune Avenue		4. CITY No. Babylon	5. STATE NY
6. ZIP CODE 11704		7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED BY RHODE ISLAND To own and manage real estate	
8. BUSINESS PHONE NO. 516-661-8300		9. STATE OF INCORPORATION RHODE ISLAND	

8. NAMES AND ADDRESSES OF THE OFFICERS			
PRESIDENT NAME Robert Devine		VICE PRESIDENT NAME James B. Glen	
STREET ADDRESS 28 Maple Avenue		STREET ADDRESS 43 Anchor Drive	
CITY Bayshore	STATE NY	CITY Massapequa, NY	STATE NY
ZIP CODE 11706		ZIP CODE 11758	
SECRETARY NAME Howard Goldsmith		TREASURER NAME Joan E. Flaxman	
STREET ADDRESS 47 Sweetbriar Drive		STREET ADDRESS 200 Sterling Road	
CITY Cranston	STATE RI	CITY Harrison	STATE NY
ZIP CODE 02920		ZIP CODE 11758	

9. NAMES AND ADDRESSES OF THE DIRECTORS			
DIRECTOR NAME Robert Devine		DIRECTOR NAME James B. Glen	
STREET ADDRESS 28 Maple Avenue		STREET ADDRESS 43 Anchor Drive	
CITY Bayshore	STATE NY	CITY Massapequa, NY	STATE NY
ZIP CODE 11706		ZIP CODE 11758	
DIRECTOR NAME Howard Goldsmith		DIRECTOR NAME Stuart Pivar	
STREET ADDRESS 47 Sweetbriar Drive		STREET ADDRESS 15 W. 67th Street	
CITY Cranston	STATE RI	CITY New York	STATE NY
ZIP CODE 02920		ZIP CODE 10023	

10. SHARES AUTHORIZED AND ISSUED					
AUTHORIZED SHARES			ISSUED SHARES		
NUMBER OF SHARES	CLASS / SERIES	PAR VALUE	NUMBER OF SHARES	CLASS / SERIES	PAR VALUE
2,000 SHS NO PAR VALUE			500	Common	No par

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 true and correct.

Joan Flaxman
Signature of Officer

Print or Type Name of Officer

V.P. - Treas.
Title of Officer

4/8/96
Date

File Date:

Check No:

By:

For Secretary of State Use Only

DETACH BOTTOM BEFORE RETURNING

FORM 31 12/95

ANNUAL REPORT

Please Type or Print
File Annually - Jan. 1 - March 1
Filing Fee \$50.00

Make Checks Payable to: Secretary of State

ALL ENTRIES MUST BE COMPLETED IN FULL OR THE FORM WILL BE RETURNED.

0073712

Corporate ID: _____ Annual Report for the year: 1995

Name of Corporation: JIRA REALTY INC.

Business entity organized under the laws of the State of: RI

For foreign entity, address and telephone number of principal office:

N/A

Phone: () N/A

Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):

361 Neptune Ave.

No. Babylon, N. Y. 11704

Phone: (516) 661-8300

Business Entity is (check one):

☒ Business Corporation (See RIGL Chapter 7-1.1)

☐ Professional Service Corporation (See RIGL Chapter 7-5.1)

Brief statement of the character of business conducted in Rhode Island:

to own and manage real estate

THE NAMES OF THE OFFICERS ARE:

	STREET ADDRESS	CITY/STATE	ZIP CODE
PRESIDENT <u>Robert Devine</u>	<u>28 Maple Ave.</u>	<u>Bayshore, N. Y.</u>	<u>11706</u>
VICE PRESIDENT <u>James B. Glen</u>	<u>43 Anchor Dr.</u>	<u>Massapequa, N. Y.</u>	<u>11758</u>
SECRETARY <u>Joan E. Flaxman</u>	<u>200 Sterling Rd.</u>	<u>Harrison, N. Y.</u>	<u>10528</u>
TREASURER <u>Howard Goldsmith</u>	<u>47 Sweetbriar Dr.</u>	<u>Cranston, RI</u>	<u>02920</u>
<u>Joan E. Flaxman</u>	<u>200 Sterling Rd.</u>	<u>Harrison, N.Y.</u>	<u>10528</u>

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
<u>Robert Devine</u>	<u>28 Maple Ave.</u>	<u>Bayshore, N. Y.</u>	<u>11706</u>
<u>James B. Glen</u>	<u>43 Anchor Dr.</u>	<u>Massapequa, N. Y.</u>	<u>11758</u>
<u>Joan E. Flaxman</u>	<u>200 Sterling Rd.</u>	<u>Harrison, N. Y.</u>	<u>10528</u>
<u>Howard Goldsmith</u>	<u>47 Sweetbriar Dr.</u>	<u>Cranston, RI</u>	<u>02920</u>
<u>Stuart Pivar</u>	<u>15 W. 67th St.</u>	<u>New York, N. Y.</u>	<u>10023</u>

NUMBER OF SHARES AUTHORIZED (Rider may be attached)

Number of Shares	Class / Series
<u>2000</u>	<u>common/no par</u>

NUMBER OF SHARES ISSUED AND OUTSTANDING (Rider may be attached)

Number of Shares	Class / Series
<u>500</u>	<u>common/no par</u>

Date January 9, 19 95

By: [Signature]

Robert Devine

PRINT OR TYPE NAME OF OFFICER SIGNING

TITLE OF OFFICER SIGNING

President

DESIGNATED REGISTERED AGENT FOR SERVICE OF PROCESS:

PLEASE NOTE: If the registered office and/or registered agent indicated below is incorrect, Form 9 must be filed.

CHARLES A. HAMELY, JR.
123 DYER STREET/HIGGINS CAVANAGH
PROVIDENCE RI 02903

FILED

APR 07 1995

By: [Signature]

576

State ID: 007512 Annual Report for the year: 1994

of Business Entity: JIRA REALTY INC.

Entity organized under the laws of the State of: R.I.

Taxpayer Identification Number: [REDACTED]

Principal office address and telephone number of principal office: N/A

Principal office address and telephone number of principal office: N/A

Principal office address and telephone number of principal office: N/A

Principal office address and telephone number of principal office: N/A

Principal office address and telephone number of principal office: N/A

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Principal office address and telephone number of principal office: N/A

Principal office address and telephone number of principal office: N/A

Principal office address and telephone number of principal office: N/A

Principal office address and telephone number of principal office: N/A

Business Entity is (check one):

- ☒ Business Corporation (See RIGL Chapter 7-1.1)
- ☐ Professional Service Corporation (See RIGL Chapter 7-5.1)
- ☐ Limited Liability Company (See RIGL 7-16)

Name, title and mailing address of contact person to whom communications may be directed:
361 Neptune Avenue

No. Babylon, N. Y. 11704

Brief statement of the character of business conducted in Rhode Island:
To own and manage real estate

Effective date of Organization: 8/25/93

Date of Qualification to do business in Rhode Island (if foreign entity)

OFFICERS ARE:

OFFICER	STREET ADDRESS	CITY/STATE	ZIP CODE
ROBERT DEVINE	28 MAPLE AVENUE	BAYSHORE, N. Y.	11706
JOHN B. GLEN	43 ANCHOR DR.	MASSAPEGUA, N. Y.	11758
JOHN E. FLAXMAN	200 STERLING RD.	HARRISON, N. Y.	10528
WARD GOLDSMITH	47 SWEETBRIAR DR.	CRANSTON, RI	02920
QUART PIVAR	15 W. 67th ST.	NEW YORK, N. Y.	10023

THE NAMES OF THE DIRECTORS ARE:

DIRECTOR	STREET ADDRESS	CITY/STATE	ZIP CODE
ROBERT DEVINE	28 MAPLE AVENUE	BAYSHORE, N. Y.	11706
JOHN B. GLEN	43 ANCHOR DR.	MASSAPEGUA, N. Y.	11758
JOHN E. FLAXMAN	299 STERLING RD.	HARRISON, N. Y.	10528
WARD GOLDSMITH	47 SWEETBRIAR DR.	CRANSTON, RI	02920
QUART PIVAR	15 W. 67th ST.	NEW YORK, N. Y.	10023

NUMBER OF SHARES AUTHORIZED (If Applicable)

NUMBER 500

CLASS COMMON

SERIES --

PAR VALUE OR WITHOUT PAR NO PAR

By: [Signature]

February 11, 1994

By: [Signature]

ROBERT DEVINE

PRINT OR TYPE NAME OF OFFICER SIGNING

PRESIDENT

TITLE OF OFFICER SIGNING

DESIGNATED REGISTERED OR RESIDENT AGENT FOR SERVICE OF PROCESS:

NOTE: If the Corporation has changed its registered office and/or registered or resident agent, Form 9 or Form LLC 3 must be filed.

CHARLES A. HAMBLY, JR.
123 DYER STREET/HIGGINS CAVANAGH
PROVIDENCE RI 02903