



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. 94413		2. Name of Corporation Shawomet Realty Company			
3. Street Address Principal Business Office 33 College Hill Rd. #15E			City Warwick	State RI	Zip 02886
4. Business Phone No. (401) 823-8906		5. State of Incorporation RHODE ISLAND		6. SIC Code 5520	
7. Brief Description of the Character of Business Conducted in Rhode Island TO OPERATE A REAL ESTATE BROKERAGE BUSINESS.					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Mary B. Shekarchi			Vice President Name Same		
Street Address 33 College Hill Rd. #15E			Street Address		
City Warwick	State RI	Zip 02886	City	State	Zip
Secretary Name Same			Treasurer Name Same		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Mary B. Shekarchi			Director Name Same		
Street Address 33 College Hill Rd. #15E			Street Address		
City Warwick	State RI	Zip 02886	City	State	Zip
Director Name Same			Director Name Same		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1,000 NO PAR VALUE			NONE	NONE	NONE

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



File Date 2-24-05
Check No. 2135
By: zc
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.

Mary B. Shekarchi 1/12/05
Signature of Officer Date
Mary B. Shekarchi
Print or Type Name of Officer
President
Title of Officer



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 94413		2. Name of Corporation Shawomet Realty Company			
3. Street Address Principal Business Office 33 College Hill Rd, #15E.			City Warwick	State RI	Zip 02886
4. Business Phone No (401) 823-8886		5. State of Incorporation RHODE ISLAND		6. SIC Code 5520	
7. Brief Description of the Character of Business Conducted in Rhode Island TO OPERATE A REAL ESTATE BROKERAGE BUSINESS.					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Mary B. Shekarchi			Vice President Name Same		
Street Address 33 College Hill Rd. #15E			Street Address		
City Warwick	State RI	Zip 02886	City	State	Zip
Secretary Name Same			Treasurer Name Same		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Mary B. Shekarchi			Director Name		
Street Address 33 College Hill Rd. #15E			Street Address		
City Warwick	State R.I.	Zip 02886	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1,000 NO PAR VALUE			NONE \$0.00	NONE \$0.00	NONE \$0.00

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



* 9 4 4 1 3 *

File Date 2/26/04
Check No. 1915
By: SC

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.

Mary B. Shekarchi 12/30/03
Signature of Officer Date

Mary B. Shekarchi
Print or Type Name of Officer

President
Title of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 94413		2. Name of Corporation Shawomet Realty Company			
3. Street Address Principal Business Office 33 College Hill Road, Suite 15-E			City Warwick	State RI	Zip 02886
4. Business Phone No. 401-8285030/401-823-8886		5. State of Incorporation Rhode Island		6. SIC Code 5520	
7. Brief Description of the Character of Business Conducted in Rhode Island To operate a Real Estate Brokerage business to buy & sell Real Estate; for any purposes under RI law					
8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Mary B. Shekarchi			Vice President Name Same		
Street Address 33 College Hill Road, Ste 15-E			Street Address		
City Warwick	State RI	Zip 02886	City	State	Zip
Secretary Name Same			Treasurer Name Same		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Mary B. Shekarchi			Director Name		
Street Address 33 College Hill Road, Ste 15-E			Street Address		
City Warwick	State RI	Zip 02886	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
AUTHORIZED SHARES			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1,000.		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 true and correct.

Mary B. Shekarchi, Pres. 10/16/03
Signature of Officer Date
Mary B. Shekarchi
Print or Type Name of Officer
President
Title of Officer

File Date 10-20-03
Check No. 1889
By: [Signature]
FOR SECRETARY OF STATE USE ONLY



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. **94413** 2. Name of Corporation **Shawomet Realty Company**
3. Street Address Principal Business Office **33 College Hill Rd, #15E** City **Warwick** State **RI** Zip **02886**
4. Business Phone No. **(401) 828 5030** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **5520**

7. Brief Description of the Character of Business Conducted in Rhode Island
Real estate Broker and agency, owned by and self deal with any other lawful purposes under RI BUS. Corp.

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

President Name Mary B. Shekarchi	Vice President Name Same as President
Street Address 33 College Hill Rd	Street Address Same as President
City Warwick State RI Zip 02886	City Same as President State RI Zip 02886
Secretary Name Same as President	Treasurer Name Same as President
Street Address Same as President	Street Address Same as President
City Same as President State RI Zip 02886	City Same as President State RI Zip 02886

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

Director Name Same as President	Director Name Same as President
Street Address Same as President	Street Address Same as President
City Same as President State RI Zip 02886	City Same as President State RI Zip 02886
Director Name Same as President	Director Name Same as President
Street Address Same as President	Street Address Same as President
City Same as President State RI Zip 02886	City Same as President State RI Zip 02886

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)
AUTHORIZED SHARES
Number of Shares Class/Series Par Value
1,000 NO PAR VALUE

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)
ISSUED SHARES
Number of Shares Class/Series Par Value
NONE

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



File Date: **FILED**
Check No.: **MAR 01 2002**
By: **BY C25271**
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 **Mary B. Shekarchi** Date **3/1/02**
Print or Type Name of Officer **MARY B. Shekarchi**
Title of Officer **President**



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. **94413** 2. Name of Corporation **Shawomet Realty Company**

3. Street Address Principal Business Office
33 College Hill Rd, Unit #15E City **Warwick** State **RI** Zip **02886**

4. Business Phone No. **(401) 828-5030 + (401) 823-8886** 5. State of Incorporation **RHODE ISLAND**

6. SIC Code **5520**

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

To operate a real estate brokerage business and for any purposes for which a corporation may be organized under R.I. Laws.

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

President Name **MARY B. Shekarchi**
Street Address **33 College Hill Rd, #15E**
City **Warwick** State **RI** Zip **02886**

Vice President Name **same**
Street Address
City State Zip

Secretary Name **~~SAME~~**
Street Address
City State Zip

Treasurer Name **SAME**
Street Address
City State Zip

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

Director Name **MARY B. Shekarchi**
Street Address **33 College Hill Rd, #15E**
City **Warwick** State **RI** Zip **02886**

Director Name
Street Address
City State Zip

Director Name
Street Address
City State Zip

Director Name
Street Address
City State Zip

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

AUTHORIZED SHARES
Number of Shares Class/Series Par Value
1,000 NO PAR VALUE

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

ISSUED SHARES
Number of Shares Class/Series Par Value
0

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



* 9 4 4 1 3 *

File Date: 3/7
Check No.: 1424
By: [Signature]

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: Mary B. Shekarchi Date: 2/12/01
Print or Type Name of Officer: MARY B. Shekarchi
Title of Officer: President



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. **10650** 2. Name of Corporation **SHAWMUT REALTY COMPANY**
 3. Street Address Principal Business Office **3760 QUAKER LANE** City **NORTH KINGSTOWN** State **RI** Zip **02852**
 4. Business Phone No. **(401) 294-3395** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **5538**
 7. Brief Description of the Character of Business Conducted in Rhode Island
LESSOR-REAL ESTATE

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

President Name NANCY MATTERA Street Address 3760 QUAKER LANE City NORTH KINGSTOWN State RI Zip 02852	Vice President Name MATTHEW MATTERA Street Address 3760 QUAKER LANE City NORTH KINGSTOWN State RI Zip 02852
Secretary Name NANCY MATTERA Street Address SAME AS ABOVE City NORTH KINGSTOWN State RI Zip 02852	Treasurer Name JOHN W. MATTERA Street Address 3760 QUAKER LANE City NORTH KINGSTOWN State RI Zip 02852

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

Director Name NANCY MATTERA Street Address SAME AS ABOVE City SAME AS ABOVE State RI Zip 02852	Director Name MATTHEW MATTERA Street Address SAME AS ABOVE City SAME AS ABOVE State RI Zip 02852
Director Name JOHN W. MATTERA Street Address SAME AS ABOVE City SAME AS ABOVE State RI Zip 02852	Director Name N/A Street Address SAME AS ABOVE City SAME AS ABOVE State RI Zip 02852

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

AUTHORIZED SHARES	Class/Series	Par Value
100 SHS NO PAR COM		

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

ISSUED SHARES	Class/Series	Par Value
100	NO PAR COMMON	

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



* 1 0 6 5 0 *

File Date: 2/13
 Check No.: 4521
 By: re

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.

Nancy L. Mattera (nm) 2-10-01
 Signature of Officer Date
Nancy L. Mattera
 Print or Type Name of Officer
President
 Title of Officer



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. **94413** 2. Name of Corporation **Shawomet Realty Company**

3. Street Address Principal Business Office **33 College Hill Rd., Unit #15E** City **WARWICK** State **RI** Zip **02886**
4. Business Phone No. **(401) 828-5030 or (401) 823-8886** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **5520**

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

*To operate a real estate brokerage business * for any purposes for which a corporation may be organized under RI Law.*

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

President Name Mary B. Shekarchi	Vice President Name SAME
Street Address 33 College Hill Rd., Unit #15E	Street Address
City WARWICK State RI Zip 02886	City State Zip
Secretary Name	Treasurer Name SAME
Street Address	Street Address
City State Zip	City State Zip

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

Director Name Mary B. Shekarchi	Director Name
Street Address 33 College Hill Rd., Unit #15E	Street Address
City WARWICK State RI Zip 02886	City State Zip
Director Name	Director Name
Street Address	Street Address
City State Zip	City State Zip

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

AUTHORIZED SHARES	Number of Shares	Class/Series	Par Value
	1,000	NO	PAR VALUE

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

ISSUED SHARES	Number of Shares	Class/Series	Par Value
	1,000		NO

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



* 9 4 4 1 3 *

File Date: **12/30/99**
Check No.: **1339**
By: **COA**

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: **Mary B. Shekarchi** Date: **12/22/99**
Print or Type Name of Officer: **Mary B. Shekarchi**
Title of Officer: **President & Director**

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. 94413		2. Name of Corporation Shawomet Realty Company			
3. Street Address Principal Business Office 33 College Hill Rd., Suite#15E			City Warwick	State RI	Zip 02886
4. Business Phone No. 401(823)8886 Or 401) 8285030		5. State of Incorporation RHODE ISLAND		6. SIC Code	
7. Brief Description of the Character of Business Conducted in Rhode Island To operate a real estate brokerage business & fro any prupose for which a corp. is organi					
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Mary B. Shekarchi			Vice President Name same		
Street Address 33 College Hill Rd., # 15E			Street Address		
City Warwick	State RI	Zip 02886	City	State	Zip
Secretary Name SAME			Treasurer Name SAME		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Mary B. Shekarchi			Director Name		
Street Address 33 College Hill Rd., suite #15E			Street Address		
City Warwick	State RI	Zip 02886	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT) <input type="checkbox"/>			11. SHARES ISSUED (*X* BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1,000 NO PAR VALUE			1000 No par value	0	0

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



File Date: March 8, 99
Check No.: 1167
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: Mary B. Shekarchi Date: 2/24/99
Print or Type Name of Officer: MARY B. SHEKARCHI
Title of Officer: President



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. **94413** 2. Name of Corporation **Shawomet Realty Company**

3. Street Address Principal Business Office **33 College Hill Road, Suite #15E** City **WARWICK** State **RI** Zip **02886**
4. Business Phone No. **(401) 828-5030 or (401) 823-8886** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code

7. Brief Description of the Character of Business Conducted in Rhode Island
To operate a real estate brokerage business for my purposes for which a corporation may be organized under RI Law.

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

President Name MARY B. Shekarchi	Vice President Name SAME
Street Address 33 College Hill Rd, Suite #15E	Street Address
City WARWICK State RI Zip 02886	City State Zip
Secretary Name SAME	Treasurer Name SAME
Street Address	Street Address
City State Zip	City State Zip

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

Director Name MARY B. Shekarchi	Director Name
Street Address 33 College Hill Rd #15E	Street Address
City WARWICK State RI Zip 02886	City State Zip
Director Name	Director Name
Street Address	Street Address
City State Zip	City State Zip

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

AUTHORIZED SHARES	Number of Shares	Class/Series	Par Value
	1,000	NO PAR VALUE	

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

ISSUED SHARES	Number of Shares	Class/Series	Par Value
	NONE		

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



File Date: **1-15-98**
Check No.: **1050**
By: **WP**

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: **Mary B. Shekarchi** Date: **1/9/98**
Print or Type Name of Officer: **MARY B. SHEKARCHI**
Title of Officer: **President + Director**