



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: **2019**
Corporation

- Filing period: January 1 - March 1
 → Filing Fee \$50.00
 → Penalty Additional \$25.00 fee if form is not filed by April 1

1. Entity ID Number 7045		2. Exact name of the Corporation FORTUNE 500, INC.												
3. Principal Office Address P.O. Box 7537			City Warwick	State RI	Zip 02887									
4. NAICS Code 531110		6. Brief description of the character of business conducted in Rhode Island Building, Developing, Selling and Leasing of Real Estate												
5. State of Incorporation Rhode Island														
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>														
President Name John B. Giusti			Vice-President Name Jeffrey Giusti											
Street Address 505 Red Chimney Drive			Street Address 39 Chase Street											
City Warwick	State RI	Zip 02886	City Warwick	State RI	Zip 02818									
Secretary Name John B. Giusti			Treasurer Name John B. Giusti											
Street Address 505 Red Chimney Drive			Street Address 505 Red Chimney Drive											
City Warwick	State RI	Zip 02886	City Warwick	State RI	Zip 02886									
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>														
Director Name			Director Name											
Street Address			Street Address											
City	State	Zip	City	State	Zip									
Director Name			Director Name											
Street Address			Street Address											
City	State	Zip	City	State	Zip									
9. Shares Authorized			10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>											
This information is currently of record in the Department of State. Changes require an additional filing.			<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>NUMBER OF SHARES</th> <th>CLASS/SERIES</th> <th>PAR VALUE</th> </tr> </thead> <tbody> <tr> <td style="text-align:center">100</td> <td style="text-align:center">Common</td> <td style="text-align:center">No Par</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	100	Common	No Par			
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100	Common	No Par												
11. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the 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.														
Name of Authorized Representative John B. Giusti				Date 1/10/19										
Signature of Authorized Representative 														

MAIL TO:
 Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040
 Website: www.sos.ri.gov

JAN 23 2019

BY

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FORM 630 - Revised: 10/2017