



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.

**FILED
STAMP**

FEB 06 2019

BY 4939

1. Entity ID Number 128532		2. Exact name of the Corporation 124B Realty, Inc.										
3. Principal Office Address 300 Front Street		City Lincoln	State RI									
		Zip 02865										
4. NAICS Code 53 - Real Estate and Rental and	6. Brief description of the character of business conducted in Rhode Island To purchase, improve, hold, rent and lease real estate of all types.											
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 Joseph A. McCann		Vice-President Name John T. McCann										
Street Address 66 Englewood Avenue		Street Address 1820 Diamond Hill Road										
City Pawtucket	State RI	City Cumberland	State RI									
Zip 02860		Zip 02864										
Secretary Name Joseph A. McCann		Treasurer Name John T. McCann										
Street Address 66 Englewood Avenue		Street Address 1820 Diamond Hill Road										
City Pawtucket	State RI	City Cumberland	State RI									
Zip 02860		Zip 02864										
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	City	State									
Zip		Zip										
Director Name		Director Name										
Street Address		Street Address										
City	State	City	State									
Zip		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.		<table border="1"> <thead> <tr> <th>NUMBER OF SHARES</th> <th>CLASS/SERIES</th> <th>PAR VALUE</th> </tr> </thead> <tbody> <tr> <td>200</td> <td>Common</td> <td>No Par Value</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>		NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	200	Common	No Par Value			
NUMBER OF SHARES	CLASS/SERIES	PAR VALUE										
200	Common	No Par Value										
Changes require an additional filing.												
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 Joseph A. McCann, President			Date 1/31/2019									
Signature of Authorized Representative <i>Joseph A. McCann President</i>			SIGN DOCUMENT HERE									

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040

Website: www.sos.ri.gov