



State of Rhode Island and Providence Plantations  
 Department of State - Business Services Division

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 SECRETARY OF STATE  
 CORPORATIONS DIV

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

2019 FEB 12 AM 10:53

- 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 <b>487817</b>		2. Exact name of the Corporation <b>E.R.S. Realty, Inc.</b>												
3. Principal Office Address <b>1404 Newport Avenue</b>			City <b>Pawtucket</b>	State <b>RI</b>	Zip <b>02861</b>									
4. NAICS Code <b>531390</b>		6. Brief description of the character of business conducted in Rhode Island <b>Purchase and leasing of real estate.</b>												
5. State of Incorporation <b>Rhode Island</b>														
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>														
President Name <b>Dani Saad</b>			Vice-President Name <b>Georgina Saad</b>											
Street Address <b>6 Diana Circle</b>			Street Address <b>6 Diana Circle</b>											
City <b>Milford</b>	State <b>MA</b>	Zip <b>01757</b>	City <b>Milford</b>	State <b>MA</b>	Zip <b>01757</b>									
Secretary Name <b>Dani Saad</b>			Treasurer Name <b>Georgina Saad</b>											
Street Address <b>6 Diana Circle</b>			Street Address <b>6 Diana Circle</b>											
City <b>Milford</b>	State <b>MA</b>	Zip <b>01757</b>	City <b>Milford</b>	State <b>MA</b>	Zip <b>01757</b>									
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>														
Director Name <b>Dani Saad</b>			Director Name <b>Georgina Saad</b>											
Street Address <b>6 Diana Circle</b>			Street Address <b>6 Diana Circle</b>											
City <b>Milford</b>	State <b>MA</b>	Zip <b>01757</b>	City <b>Milford</b>	State <b>MA</b>	Zip <b>01757</b>									
Director Name <b>NONE</b>			Director Name <b>NONE</b>											
Street Address			Street Address											
City	State	Zip	City	State	Zip									
9. Shares Authorized			10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>											
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;"> <tr> <td style="text-align: center;">NUMBER OF SHARES</td> <td style="text-align: center;">CLASS/SERIES</td> <td style="text-align: center;">PAR VALUE</td> </tr> <tr> <td style="text-align: center;">100 Shares</td> <td style="text-align: center;">Common</td> <td style="text-align: center;">No-Par Value</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </table>			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	100 Shares	Common	No-Par Value			
			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE									
100 Shares	Common	No-Par Value												
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 <b>Dani Saad, President</b>				Date <b>2/12/19</b>										
Signature of Authorized Representative _____ 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

**FILED**

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