



LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2005

Filing Period: September 1 - November 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. ID No. 135826		2. Exact name of the limited liability company Younes Realty, LLC			
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island REAL ESTATE			
5. Principal office address 2138 MENDON ROAD		City CUMBERLAND	State RI	Zip 02864-	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name MARIA C YOUNES		Contact Title			
Street Address 2138 MENDON ROAD		City CUMBERLAND	State RI	Zip 02864-	
7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE FILL IN SPACES BEFORE USING ATTACHMENTS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> ANY MODIFICATIONS TO MANAGERS REQUIRES FILING OF AMENDMENT. R.I.G.L 7-16-12 (a) (2) / 7-16-52					
Manager Name		•Manager Name			
Street Address		•Street Address			
City		State	Zip	City	
Manager Name		•Manager Name			
Street Address		•Street Address			
City		State	Zip	City	
8. RESIDENT AGENT IN RHODE ISLAND -DO NOT ALTER- Changes require filing of Form 642 - R.I.G.L. 7-16-11					
Agent Name JOHN S. PETRONE, ESQ.		Address 145 PHENIX AVENUE			
Address		City CRANSTON		Zip 02920-	

This report must be signed in ink by an authorized person pursuant to 7-16-66.



1 3 5 8 2 6

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.

135826 DLLC/08/30/05 12:29:40 PM

File Date 9/21/05

Check No. 5336

By: A

FOR SECRETARY OF STATE USE ONLY

Maria C. Younes 9/16/05
Signature of Authorized Person Date

Maria C. Younes
Print or Type Name of Authorized Person



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

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1. ID No. 135826		2. Exact name of the limited liability company Younes Realty, LLC			
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5. Principal office address 2138 Mendon Road			City Cumberland	State RI	Zip 02864
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name Maria C. Younes			Contact Title Member		
Street Address 2138 Mendon Road			City Cumberland	State RI	Zip 02864
7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE FILL IN SPACES BEFORE USING ATTACHMENTS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> ANY MODIFICATIONS TO MANAGERS REQUIRES FILING OF AMENDMENT, R.I.G.L. 7-16-12 (a) (2) / 7-16-52					
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This report must be signed in ink by an authorized person pursuant to R.I.G.L. 7-16-66.



* 1 3 5 8 2 6 *

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.

File Date 10/7/04
Check No. 4626
By: W.
FOR SECRETARY OF STATE USE ONLY

Maria C. Younes 10/1/04
Signature of Authorized Person Date
Maria C. Younes
Print or Type Name of Authorized Person