



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

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 70842 | | 2. Name of Corporation LAJ Realty, Inc. | | | |
| 3. Street Address Principal Business Office 1414 Atwood Avenue | | | City Johnston | State RI | Zip 02919 |
| 4. Business Phone No. 273-6800 | | 5. State of Incorporation RHODE ISLAND | | | 6. SIC Code 5538 |
| 7. Brief Description of the Character of Business Conducted in Rhode Island OWNERSHIP AND DEVELOPMENT OF REAL ESTATE. | | | | | |
| 8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS | | | | | |
| President Name Alfred Carpionato | | | Vice President Name Alfred Carpionato | | |
| Street Address 1414 Atwood Avenue | | | Street Address 1414 Atwood Avenue | | |
| City Johnston | State RI | Zip 02919 | City Johnston | State RI | Zip 02919 |
| Secretary Name Alfred Carpionato | | | Treasurer Name Alfred Carpionato | | |
| Street Address 1414 Atwood Avenue | | | Street Address 1414 Atwood Avenue | | |
| City Johnston | State RI | Zip 02919 | City Johnston | State RI | Zip 02919 |
| 9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS | | | | | |
| 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 |
| 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 |
| 100 COMM NO PAR VALUE | | | 100 | common | no par value |
| | | | | | |

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



70842

| | |
|---------------------------------|--------|
| File Date | 6-1-05 |
| Check No. | 66159 |
| By: | |
| 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

Alfred Carpionato

Print or Type Name of Officer

President

Title of Officer



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

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. 70842 | | 2. Name of Corporation LAJ Realty, Inc. | | | |
| 3. Street Address Principal Business Office 1414 Atwood Avenue | | | City Johnston | State RI | Zip 02919 |
| 4. Business Phone No. 273-6800 | | 5. State of Incorporation RHODE ISLAND | | | 6. SIC Code 5538 |
| 7. Brief Description of the Character of Business Conducted in Rhode Island OWNERSHIP AND DEVELOPMENT OF REAL ESTATE. | | | | | |
| 8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS | | | | | |
| President Name Alfred Carpionato | | | Vice President Name Alfred Carpionato | | |
| Street Address 1414 Atwood Avenue | | | Street Address 1414 Atwood Avenue | | |
| City Johnston | State RI | Zip 02919 | City Johnston | State RI | Zip 02919 |
| Secretary Name Alfred Carpionato | | | Treasurer Name Alfred Carpionato | | |
| Street Address 1414 Atwood Avenue | | | Street Address 1414 Atwood Avenue | | |
| City Johnston | State RI | Zip 02919 | City Johnston | State RI | Zip 02919 |
| 9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS | | | | | |
| 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 |
| 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 |
| 100 COMM NO PAR VALUE | | | 100 | common | no par value |

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



* 7 0 8 4 2 *

File Date 3/9/04
Check No. 0000 6096
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 [Signature]
Alfred Carpionato

Print or Type Name of Officer

President
Title of Officer



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Edward S. Inman, III, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003

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

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 70842 2. Name of Corporation LAJ Realty, Inc.

3. Street Address Principal Business Office
1414 Atwood Avenue

City State Zip
Johnston RI 02919

4. Business Phone No. 273-6800 5. State of Incorporation RHODE ISLAND

6. SIC Code 5538

7. Brief Description of the Character of Business Conducted in Rhode Island
ownership and development of real estate

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

President Name
Alfred Carpionato

Vice President Name
Alfred Carpionato

Street Address
1414 Atwood Avenue

Street Address
1414 Atwood Avenue

City State Zip
Johnston RI 02919

City State Zip
Johnston RI 02919

Secretary Name
Alfred Carpionato

Treasurer Name
Alfred Carpionato

Street Address
1414 Atwood Avenue

Street Address
1414 Atwood Avenue

City State Zip
Johnston RI 02919

City State Zip
Johnston RI 02919

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

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

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

AUTHORIZED SHARES

Number of Shares Class/Series Par Value

100 COMM NO PAR VALUE

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

ISSUED SHARES

Number of Shares Class/Series Par Value

100 common no par value

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



* 7 0 8 4 2 *

File Date: 4.30.03

Check No.: 10980

By: 10P

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

Alfred Carpionato

Date

3.24.03

Print or Type Name of Officer

President

Title of Officer

5

Form 630 12/02



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Edward S. Inman, III, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040



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. 70842 2. Name of Corporation LAJ Realty, Inc.

3. Street Address Principal Business Office 1414 Atwood Avenue City Johnston State RI Zip 02919
4. Business Phone No. 273-6800 5. State of Incorporation RHODE ISLAND 6. SIC Code 5538

7. Brief Description of the Character of Business Conducted in Rhode Island
ownership and development of real estate

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

| | | | |
|----------------|--------------------|---------------------|--------------------|
| President Name | Alfred Carpionato | Vice President Name | Alfred Carpionato |
| Street Address | 1414 Atwood Avenue | Street Address | 1414 Atwood Avenue |
| City | Johnston RI 02919 | City | Johnston RI 02919 |
| Secretary Name | Alfred Carpionato | Treasurer Name | Alfred Carpionato |
| Street Address | 1414 Atwood Avenue | Street Address | 1414 Atwood Avenue |
| City | Johnston RI 02919 | City | Johnston RI 02919 |

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

| | | | |
|----------------|-----------|----------------|-----------|
| 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 |

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

AUTHORIZED SHARES
Number of Shares Class/Series Par Value
100 COMM NO PAR VALUE

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

ISSUED SHARES
Number of Shares Class/Series Par Value
100 common no par value

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



* 7 0 8 4 2 *

File Date: 3/18/02
Check No.: 002760
By: JS

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 Alfred Carpionato Date 3-5-02
Print or Type Name of Officer
President

Title of Officer



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040



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. **70842** 2. Name of Corporation **LAJ Realty, Inc.**

3. Street Address Principal Business Office **1414 Atwood Avenue** City **Johnston** State **RI** Zip **02919**
4. Business Phone No. **273-6800** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **5538**

7. Brief Description of the Character of Business Conducted in Rhode Island
ownership and development of real estate

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

| | |
|--|---|
| President Name Alfred Carpionato Street Address 1414 Atwood Avenue City Johnston State RI Zip 02919 Secretary Name Alfred Carpionato Street Address 1414 Atwood Avenue City Johnston State RI Zip 02919 | Vice President Name Alfred Carpionato Street Address 1414 Atwood Avenue City Johnston State RI Zip 02919 Treasurer Name Alfred Carpionato Street Address 1414 Atwood Avenue City Johnston State RI Zip 02919 |
|--|---|

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

| | |
|--|--|
| Director Name Street Address City State Zip 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 |
| 100 SHS COMM NO PAR VALUE | | |

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

ISSUED SHARES

| | | |
|------------------|---------------|---------------------|
| Number of Shares | Class/Series | Par Value |
| 100 | Common | no par value |

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



* 7 0 8 4 2 *

File Date: 3/2

Check No.: 10227

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 [Signature] Date 2-8-01

Alfred Carpionato

Print or Type Name of Officer

President

Title of Officer



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040



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. **70842** 2. Name of Corporation **LAJ Realty, Inc.**
3. Street Address Principal Business Office **1414 Atwood Avenue** City **Johnston** State **RI** Zip **02919**
4. Business Phone No. **273-6800** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **5538**

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

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

| | |
|--|---|
| President Name Alfred Carpionato Street Address 1414 Atwood Avenue City Johnston State RI Zip 02919 | Vice President Name Alfred Carpionato Street Address 1414 Atwood Avenue City Johnston State RI Zip 02919 |
| Secretary Name Alfred Carpionato Street Address 1414 Atwood Avenue City Johnston State RI Zip 02919 | Treasurer Name Alfred Carpionato Street Address 1414 Atwood Avenue City Johnston State RI Zip 02919 |

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

| | |
|---|---|
| Director Name Street Address City State Zip | 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
100 SHS COMM NO PAR VALUE

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

ISSUED SHARES
Number of Shares Class/Series Par Value
100 common no par value

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



* 7 0 8 4 2 *

3/21/00

File Date: _____

Check No.: **9440**

By: **2**

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.

Alfred Carpionato 3-7-00
Signature of Officer Date

Alfred Carpionato
Print or Type Name of Officer

President
Title of Officer



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040

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. 70842 | | 2. Name of Corporation LAJ Realty, Inc. | |
| 3. Street Address Principal Business Office 1414 Atwood Avenue | | City Johnston | State RI |
| 4. Business Phone No. 273-6800 | | 5. State of Incorporation RHODE ISLAND | |
| 6. SIC Code 5538 | | 7. Brief Description of the Character of Business Conducted in Rhode Island real estate | |
| 8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) • FILL IN SPACES BEFORE USING ATTACHMENTS | | | |
| President Name Alfred Carpionato | | Vice President Name Alfred Carpionato | |
| Street Address 1414 Atwood Avenue | | Street Address 1414 Atwood Avenue | |
| City Johnston | State RI | City Johnston | State RI |
| Zip 02919 | | Zip 02919 | |
| Secretary Name Alfred Carpionato | | Treasurer Name Alfred Carpionato | |
| Street Address 1414 Atwood Avenue | | Street Address 1414 Atwood Avenue | |
| City Johnston | State RI | City Johnston | State RI |
| Zip 02919 | | Zip 02919 | |
| 9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) • FILL IN SPACES BEFORE USING ATTACHMENTS | | | |
| 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 | |
| 10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT) | | 11. SHARES ISSUED (*X* BOX FOR ATTACHMENT) | |
| AUTHORIZED SHARES | | ISSUED SHARES | |
| Number of Shares | Class/Series | Number of Shares | Class/Series |
| 100 SHS COMM NO PAR VALUE | | 100 | COMMON |
| Par Value | | Par Value | |
| | | no par value | |

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



* 7 0 8 4 2 *

File Date: **04-08-99**

Check No.: **2430**

By: **JD**

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.

Alfred Carpionato 3/9/99
Signature of Officer Date

Alfred Carpionato

Print or Type Name of Officer
President

Title of Officer



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-277-3040



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.

2. Name of Corporation

70842

LAJ Realty, Inc.

3. Street Address Principal Business Office

1414 Atwood Avenue

City

Johnston

State

RI

Zip

02919

4. Business Phone No.

273-6800

5. State of Incorporation

RHODE ISLAND

6. SIC Code

5538

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

real estate

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

President Name

Alfred Carpionato

Vice President Name

Alfred Carpionato

Street Address

1414 Atwood Avenue

Street Address

1414 Atwood Avenue

City

Johnston

State

RI

Zip

02919

City

Johnston

State

RI

Zip

02919

Secretary Name

Alfred Carpionato

Treasurer Name

Alfred Carpionato

Street Address

1414 Atwood Avenue

Street Address

1414 Atwood Avenue

City

Johnston

State

RI

Zip

02919

City

Johnston

State

RI

Zip

02919

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

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

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

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

100 SHS COMM NO PAR VALUE

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

ISSUED SHARES

Number of Shares

Class/Series

Par Value

100

common

no par value

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



* 7 0 8 4 2 *

File Date: 3-11-98

Check No.: 9541

By: IUP

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

Alfred Carpionato

Date

MARCH 1, 1998

Print or Type Name of Officer

President

Title of Officer



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-277-3040



PROFIT CORPORATION ANNUAL REPORT 1997

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.

70842

2. Name of Corporation

LAJ Realty, Inc.

3. Street Address Principal Business Office

1414 Atwood Avenue

City

Johnston

State

RI

Zip

02919

4. Business Phone No.

273-6800

5. State of Incorporation

RHODE ISLAND

6. SIC Code

5538

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

real estate

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

President Name

Alfred Carpionato

Vice President Name

Alfred Carpionato

Street Address

1414 Atwood Avenue

Street Address

1414 Atwood Avenue

City

Johnston

State

RI

Zip

02919

City

Johnston

State

RI

Zip

02919

Secretary Name

Alfred Carpionato

Treasurer Name

Alfred Carpionato

Street Address

1414 Atwood Avenue

Street Address

1414 Atwood Avenue

City

Johnston

State

RI

Zip

02919

City

Johnston

State

RI

Zip

02919

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

Director Name

Director Name

Street Address

Street Address

City

City

State

State

Zip

Zip

Director Name

Director Name

Street Address

Street Address

City

City

State

State

Zip

Zip

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

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

100 SHS COMM NO PAR VALUE

ISSUED SHARES

Number of Shares

Class/Series

Par Value

100

common

no par value

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



* 7 0 8 4 2 *

File Date:

3/24/97

Check No.:

6976

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

Alfred Carpionato

Print or Type Name of Officer

President

Title of Officer

Date

3/4/97

PROFIT CORPORATION ANNUAL REPORT

1996



State of Rhode Island and Providence Plantations
James R. Langevin, Secretary of State
Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335 • (401) 277-3040

Filing Period: January 1-March 1

Filing Fee: \$50.00

PLEASE TYPE OR PRINT IN BLACK INK.

| | | | |
|--|--|--|----------------------|
| 1. CORPORATE ID NO. 70842 | | 2. NAME OF CORPORATION LAJ Realty, Inc. | |
| 3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE 1414 Atwood Avenue | | CITY Johnston | STATE RI |
| 4. BUSINESS PHONE NO. 273-6800 | | 5. STATE OF INCORPORATION RHODE ISLAND | 6. ZIP CODE 02919 |
| 7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND real estate | | | |

| 8. NAMES AND ADDRESSES OF THE OFFICERS | | | | | |
|--|-------------|-------------------|--|-------------|-------------------|
| PRESIDENT NAME Alfred Carpionato | | | VICE PRESIDENT NAME Alfred Carpionato | | |
| STREET ADDRESS 1414 Atwood Avenue | | | STREET ADDRESS 1414 Atwood Avenue | | |
| CITY Johnston | STATE RI | ZIP CODE 02919 | CITY Johnston | STATE RI | ZIP CODE 02919 |
| SECRETARY NAME Alfred Carpionato | | | TREASURER NAME Alfred Carpionato | | |
| STREET ADDRESS 1414 Atwood Avenue | | | STREET ADDRESS 1414 Atwood Avenue | | |
| CITY Johnston | STATE RI | ZIP CODE 02919 | CITY Johnston | STATE RI | ZIP CODE 02919 |

| 9. NAMES AND ADDRESSES OF THE DIRECTORS | | | | | |
|---|-------|----------|----------------|-------|----------|
| DIRECTOR NAME | | | DIRECTOR NAME | | |
| STREET ADDRESS | | | STREET ADDRESS | | |
| CITY | STATE | ZIP CODE | CITY | STATE | ZIP CODE |
| DIRECTOR NAME | | | DIRECTOR NAME | | |
| STREET ADDRESS | | | STREET ADDRESS | | |
| CITY | STATE | ZIP CODE | CITY | STATE | ZIP CODE |
| DIRECTOR NAME | | | DIRECTOR NAME | | |
| STREET ADDRESS | | | STREET ADDRESS | | |
| CITY | STATE | ZIP CODE | CITY | STATE | ZIP CODE |

| 10. SHARES AUTHORIZED AND ISSUED | | | | | |
|----------------------------------|----------------|-----------|------------------|----------------|--------------|
| AUTHORIZED SHARES | | | ISSUED SHARES | | |
| NUMBER OF SHARES | CLASS / SERIES | PAR VALUE | NUMBER OF SHARES | CLASS / SERIES | PAR VALUE |
| 100 SHS COMM NO PAR VALUE | | | 100 | Common | 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.

File Date:

2/22/96

Check No:

3718

By:

CP

For Secretary of State Use Only

Signature of Officer

Alfred Carpionato

Print or Type Name of Officer

President

Title of Officer

2/21/96
Date

State of Rhode Island and Providence Plantations
Office of The Secretary of State
100 North Main Street
Providence, Rhode Island 02903-1335
401-277-3040

ANNUAL REPORT
Please Type or Print
File Annually - Jan. 1 - March 1
Filing Fee \$50.00
Make Checks Payable to: Secretary of State

ALL ENTRIES MUST BE COMPLETED IN FULL OR THE FORM WILL BE RETURNED.

Corporate ID: 0070842 Annual Report for the year: 1995

Name of Corporation: LAJ Realty, Inc.
Business entity organized under the laws of the State of: Rhode Island
For foreign entity, address and telephone number of principal office:

Business Entity is (check one):
☒ Business Corporation (See RIGL Chapter 7-1.1)
☐ Professional Service Corporation (See RIGL Chapter 7-5.1)

Phone: ()
Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):
1414 Atwood Avenue
Johnston, RI 02919
Phone: (401) 273-6800

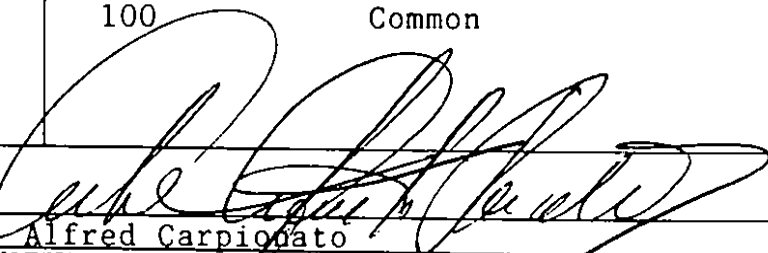
Brief statement of the character of business conducted in Rhode Island:
real estate

| THE NAMES OF THE OFFICERS ARE: | | | |
|--------------------------------|--------------------|--------------|----------|
| RESIDENT | STREET ADDRESS | CITY/STATE | ZIP CODE |
| Alfred Carpionato | 1414 Atwood Avenue | Johnston, RI | 02919 |
| VICE PRESIDENT | STREET ADDRESS | CITY/STATE | ZIP CODE |
| Alfred Carpionato | 1414 Atwood Avenue | Johnston, RI | 02919 |
| SECRETARY | STREET ADDRESS | CITY/STATE | ZIP CODE |
| Alfred Carpionato | 1414 Atwood Avenue | Johnston, RI | 02919 |
| TREASURER | STREET ADDRESS | CITY/STATE | ZIP CODE |
| Alfred Carpionato | 1414 Atwood Avenue | Johnston, RI | 02919 |

| THE NAMES OF THE DIRECTORS ARE: | | | |
|---------------------------------|----------------|------------|----------|
| NAME | STREET ADDRESS | CITY/STATE | ZIP CODE |
| | | | |
| NAME | STREET ADDRESS | CITY/STATE | ZIP CODE |
| | | | |
| NAME | STREET ADDRESS | CITY/STATE | ZIP CODE |
| | | | |

| NUMBER OF SHARES AUTHORIZED (Rider may be attached) | | NUMBER OF SHARES ISSUED AND OUTSTANDING (Rider may be attached) | |
|---|----------------|---|----------------|
| Number of Shares | Class / Series | Number of Shares | Class / Series |
| 100 | Common | 100 | Common |

Date 4-13, 19 95

By: 
PRINT OR TYPE NAME OF OFFICER SIGNING: Alfred Carpionato
TITLE OF OFFICER SIGNING: President

DESIGNATED REGISTERED AGENT FOR SERVICE OF PROCESS

PLEASE NOTE: If the registered office and/or registered agent indicated below is incorrect, Form 9 must be filed.

ANGELO R. MAROCCO, ESQ.
1200 RESERVOIR AVENUE
CRANSTON RI 02920

FILED
MAY 30 1995
By WA 134699

ding fee \$50.00
payable to:
Secretary of State

PLEASE TYPE or PRINT *MYC CR#3102 #1500.00*

State of Rhode Island and Providence Plantations
Office of The Secretary of State
100 North Main Street
Providence, Rhode Island 02903-1335
401-277-3040

File Annually
LLC: Sept. 1 - Nov. 1
CORP: Jan. 1 - March 1

Corporate ID: 0070842 Annual Report for the year: 1994

Name of Business Entity: LAJ Realty, Inc.

Business entity organized under the laws of the State of: Rhode Island

Federal Taxpayer Identification Number: [REDACTED]

For foreign entity, address and telephone number of principal office:

Phone: () _____

Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):

1414 Atwood Avenue
Johnston, RI 02919

Phone: (401) 273-6800

Business Entity is (check one):

- ☒ Business Corporation (See RIGL Chapter 7-1.1)
☐ Professional Service Corporation (See RIGL Chapter 7-5.1)
☐ Limited Liability Company (See RIGL 7-16)

Name, title and mailing address of contact person to whom communications may be directed:

Alfred Carpionato, President
1414 Atwood Avenue
Johnston, RI 02919

Brief statement of the character of business conducted in Rhode Island:
real estate

Date of Organization: 12/30/92

Date of Qualification to do business in Rhode Island (if foreign entity):

THE NAMES OF THE OFFICERS ARE:

| | STREET ADDRESS | CITY/STATE | ZIP CODE |
|--|---------------------------|---------------------|--------------|
| <input type="checkbox"/> CHIEF EXECUTIVE OFFICER OR <input checked="" type="checkbox"/> PRESIDENT (Check One) | | | |
| <u>Alfred Carpionato</u> | <u>1414 Atwood Avenue</u> | <u>Johnston, RI</u> | <u>02919</u> |
| <input type="checkbox"/> CHIEF OPERATING OFFICER OR <input checked="" type="checkbox"/> VICE PRESIDENT (Check One) | | | |
| <u>Alfred Carpionato</u> | <u>1414 Atwood Avenue</u> | <u>Johnston, RI</u> | <u>02919</u> |
| <input type="checkbox"/> CUSTODIAN OF RECORDS OR <input checked="" type="checkbox"/> SECRETARY (Check One) | | | |
| <u>Alfred Carpionato</u> | <u>1414 Atwood Avenue</u> | <u>Johnston, RI</u> | <u>02919</u> |
| <input type="checkbox"/> CHIEF FINANCIAL OFFICER OR <input checked="" type="checkbox"/> TREASURER (Check One) | | | |
| <u>Alfred Carpionato</u> | <u>1414 Atwood Avenue</u> | <u>Johnston, RI</u> | <u>02919</u> |

THE NAMES OF THE DIRECTORS ARE:

| NAME | STREET ADDRESS | CITY/STATE | ZIP CODE |
|---------------|-------------------------|---------------------|-------------------|
| _____ NAME | _____ STREET ADDRESS | _____ CITY/STATE | _____ ZIP CODE |
| _____ NAME | _____ STREET ADDRESS | _____ CITY/STATE | _____ ZIP CODE |

NUMBER OF SHARES AUTHORIZED (If Applicable)

NUMBER 100
CLASS Common
SERIES --

PAR VALUE OR WITHOUT PAR No Par Value

NUMBER OF SHARES ISSUED AND OUTSTANDING (If Applicable)

NUMBER 100
CLASS Common
SERIES --

PAR VALUE OR WITHOUT PAR No Par Value

FILED

APR 25 1994

By MNE

Secretary of State
Corporation Division
100 North Main Street
Providence, RI 02903

RE: 1994 Annual Reports for Carpionato Properties, Inc.
entities

Dear Sir/Madam:

Enclosed herewith please find the annual report forms for the following corporations, which are Carpionato Properties, Inc. entities:

10#

- 74115 - 1. Carpionato Properties, Inc.
- 11701 - 2. Amalgamated Development II, Inc.
- 4048 - 3. Chateau Properties, Ltd.
- 62117 - 4. East Greenwich Wine & Spirits, Inc.
- 61917 - 5. Amalgamated Financial Development XVI, Inc.
- 61509 - 6. Amalgamated Financial Development XV, Inc.
- 32250 - 7. Amalgamated Development, Inc.
- 10144 - 8. Meshanticut Vista, Inc.
- 10133 - 9. Meshanticut Properties, Inc.
- 32596 - 10. Integrated Properties IV, Inc.
- 70842 - 11. LAJ Realty, Inc.
- 37274 - 12. Greene Construction, Inc.
- 7296 - 13. 1414 Associates, Inc.
- 19945 - 14. Integrated Properties, Inc.
- 17956 - 15. Integrated Properties II, Inc.
- 16251 - 16. Washers, Inc.
- 64377 - 17. Securities Exchange Group, Inc.
- 64380 - 18. Empire Management Group, Inc.
- 72277 - 19. Douglas Ave. Associates, Inc.
- 62266 - 20. Amalgamated Development XX, Inc.
- 72248 - 21. Resort Properties, Inc.
- 67076 - 22. Bellecastle Realty, Inc.
- 72944 - 23. Tycoon Food & Beverage, Inc.
- 14368 - 24. National Investments, Ltd.
- 3687 - 25. Integrated Properties XI, Inc.
- 65084 - 26. Hanson International, Inc.
- 31368 - 27. Integrated Properties III, Inc.
- 9348 - 28. Scituate Properties, Inc.
- 66588 - 29. Bellcourt Realty, Inc.
- 4721 - 30. Consolidated Maintenance Services, Inc.

Also enclosed herewith please find my client's check in the amount of \$1,500.00 which represents the cost of the filing of these 1994 annual reports.

Thank you.

Very truly yours,

Angelo R. Marocco

ARM/tg
Enclosures

Filing Fee \$50.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0070842 Annual Report for the year 1993

FIRST: The name of the corporation is LAJ Realty, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is real estate

FOURTH: If foreign corporation, address of its principal office.....

FIFTH: Business address in Rhode Island 1414 Atwood Avenue, Johnston, RI 02919

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

| Name | Office | Address (including number, street, zip code) |
|------|--------|--|
|------|--------|--|

| | | |
|------------------|----------------|--------------------------------------|
| | Director | |
| | Director | |
| | Director | |
| Louis Carpionato | President | 1414 Atwood Ave., Johnston, RI 02919 |
| Louis Carpionato | Vice President | 1414 Atwood Ave., Johnston, RI 02919 |
| Louis Carpionato | Secretary | 1414 Atwood Ave., Johnston, RI 02919 |
| Louis Carpionato | Treasurer | 1414 Atwood Ave., Johnston, RI 02919 |

SEVENTH: Number of Shares authorized:

| No. of Shares | Class | Series | Par Value or statement that shares are without par value |
|---------------|--------|--------|---|
| 100 | Common | -- | No Par Value |

EIGHTH: Number of Shares issued:

| No. of Shares | Class | Series | Par Value or statement that shares are without par value |
|---------------|--------|--------|---|
| 100 | Common | -- | No Par Value |

FILED

DEC 7 1993

Series 93#9

By 93#9
110360

Dated December 1, 19 93

LAJ Realty, Inc.
(Name of Corporation)

By Louis Carpionato
Louis Carpionato
Title President

(Report must be signed by an officer)