

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

Matthew A. Brown, Secretary of State

FOR SECRETARY OF STATE USE ONLY

Corporations Division 100 North Main Street

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

Providence, RI 02903-1335 401.222.3040

PROFIT CORP	PORATION A	NNUAL REPOR	T FOR THE YE	AR 2005	<u> </u>
Filing Period: January (FORM MUST BETYPED OR		Filing Fee: \$50.00			
1. Corporate ID No.	2 Name of Corpo	oration			
100747	Capwell Re				
3. Street Address Principal Bus 2 Y Y	Gano S	7.	City Pros	State R.I	02906
1. Business Phone No	3-0038	5. State of Incorporation			6. SIC Code
7. Brief Description of the Chair	racter of Business Conduct	RHODE ISLAND			5520
BUY, SELL, LEASE	E, FINANCE, DEVELO	P, AND OPERATE REAL ES			í
8. NAMES AND ADDRE President Name	SSES OF THE OFFIC	CERS: ("X" BOX FOR ATT		N SPACES BEFORE USING A	TTACHMENTS
Larry (Soldstoin	/	Vice President Name	•	
Street Address	vo ST.	·	Sirect Address		
City P 2	State Q	5 2ip 02806	City	State	Zip
Secretary Name		0000	Treasurer Name		
<u> </u>			i i i i i i i i i i i i i i i i i i i		
Street Address			Street Address		<u>-</u> -
City	State	Zip	City	State	7/0
		""	G .,,	Surve	Zip
Director Name Street Address		CTORS: ("X" BOX FOR AT	Director Name	IN SPACES BEFORE USING	ATTACHMENTS
Career Amarica			Street Address		
Gity	State	Sila .	City	State	Zip
Director Name		·····J	Director Name		
Street Address		<u></u>			
			Street Address		
Cuy	State	Zip	City	State	Zip
10. SHARES AUTHORIZ AUTHORIZED SHARES	ED ("X" BOX FOR	ATTACHMENT)	11. SHARES ISSUED	 ("X" BOX FOR ATTACHMI	 ('tna)
Number of Shares	Class Series	Par Value	Number of Shares	Class/Series	Par Value
8,000 \$1.00 PAR VALU	JE		\ww	Conned	1.00
This report must	be signed in ink by	either the President. Vice 1	President, Secretary Assis	tant Secretary, Treasurer, Rec	Priver or Trustee
			Under penalty of princluding any according	perjury. I declare and affirm that lompanying schedules and stateming true and correct.	have examined this repo

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

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

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

Providence, RJ 02903-1335 401.222.3040 2004 02906 5520 Z.ip *7.*(p Zip

(FORM MUST BE TYPED OR PRINTED IN BIACK) 1. Corporate ID No. 2. Name of Corporation Capwell Realty, Inc. 3 Street Address Principal Business Office 4. Business Phone No 0038 Description of the Character of Business Conducted in Rhode Island
BUY, SELL, LEASE, FINANCE, DEVELOP, AND OPERATE REAL ESTATE 8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS President Name Vice President Name Street Address Street Address City State Trensurer Name Street Address State 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 Director Name Director Name Street Address Street Address State Zip City State 10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) AUTHORIZED SHARES ISSUED SHARES Number of Shares Class Series Par Value Number of Shares Class/Series Par Value 8,000 \$1.00 PAR VALUE NONE This report must be signed in ink by either the President. Vice President. Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

File Date	REC	1 0 0 7 4 1 EIVED	7 *
Check No.	JAN_2	2 2 2004	<u> </u>
Ву:	BY	110 100	
F	OR SECRETARY OF	STATE USE ONLY	

Under penalty of perjury. I declare and affincluding any accompanying schedules are contained herein are true and correct.	
Signature of Officer Larry Golds:	Paie tein
Print or Type Nume of Officer	
Title of Officer	Form 630 Rev. 12/03

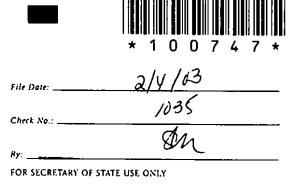
Edward S. Inman, III, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003 Filing Period: January 1-March 1 • Filing Fee: \$50.00

STOP PILANERIAD INSTRUCTIONS

PORM MOST BE LITTED OKT KIN 1. Corporate ID No.	2. Name of Corpor	ation	-		
100747	Capwell Re				
3. Street Address Principal Busines:	s Office	outy, mo.	City	State	Zip
244 Gano Stre 4. Business Phone No.	et	S. State of Incorporati	Providence	RI	02906 6. SIC Code
401-453-0038 7. Brief Description of the Characte	er of Business Conducted	RHODE ISLA	ND		5520
Buy, lease, se	11, finance,	develop and ope	erate real estate.		
8. NAMES AND ADDRES President Name	SSES OF THE OFF	FICERS ("X" BOX FOR ATI	FACHMENT) FILL IN SPACES Vice President Name	BEFORE USING ATTA	CHMENTS
Larry Goldste	in				
Street Address			Street Address		
244 Gano Stre	et				
cny Providence	State RI	^{zip} 02906	City	State	Zip
Secretary Name		•	Treasurer Name	•	
Genc Goldstei	η				
Street Address			Street Address		
244 Gano Stre	et				
City	State	Zip	City	State	Zip
Providence	RI	02906			_
9. NAMES AND ADDRES	SSES OF THE DIR	RECTORS ("X" BOX FOR A		ES BEFORE USING AT	TACHMENTS
Director Name			Director Name		
NONE					
Street Address			Street Address		
Gity	State	Zip	City	State	Zip
Director Name			. Director Name		• •
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZE	ED ("X" BOX FOR AT	TACHMENT)	11. SHARES ISSUED ("X" BOX FOR ATTACHMEN	(7:7)
AUTHORIZEE) SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
8,000 \$1.00 PAR VALUE			None		

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.

Leng Middle Signatur of Officer	1/21/03	
Signature of Officer	Date	

Larry	. Gold	lstei	n	
tint or Type Name	of Officer			

President

Title of Officer

Form 630 12102



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. 2. Name of Corporation 100747 Capwell Realty, Inc. 3. Street Address Principal Business Office State 244 Gano Street Providence RI 02906 4. Business Phone No. S. State of Incorporation 6. SIC Code 401-453-0038 Rhode Island 5520 7. Brief Description of the Character of Rusiness Conducted in Rhode Island Buy, sell, lease, finance, develop and operate real estate 8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Larry Goldstein Street Address . Street Addiess 244 Gano Street State Zip City State Zip Providence RI 02906 Secretary Name Gene Goldstein Street Address Street Address 244 Gano Street State 7. ip State 7.1p Providence RI 02906 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 State Zip Cliv State Director Name Director Name Street Address Street Address Zio City Zip 10. SHARES AUTHORIZED (*X* ROX FOR ATTACHMENT) 11. SHARES ISSUED (*X* BOX FOR ATTACHMENT) AUTHORIZED SHARES ESSURED SHARES Number of Shares Class/Series Par Value Number of Shares Class/Series Par Value 8,000 Common \$1.00

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

None

File Date:	FILED TO CO 17 CO
Check No.	FEB 2 1 2002
Ву:	By CAR Solding
FOR SECR	ETARY 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.

_ Ly Meddet	2/12/02	
Signature of Office	Date	
I C-1 4-4-4 .		

	Larry	Gold	lstein
rint or	Type Name of	Officer	

President

(FORM MUST BE TYPED IN BLACK)

Edward S. Inman, 111. 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

1. Corporate ID No.	2. Name of Cospor	atlon	- .	•	_
100747		Capwell Re	alty, Inc.		
3. Street Address Principal Busin	less Office		City	State	Zip
244 Gano Str. 4. Business Phone No.	eet	5. State of Incorporation	Providence	RI	02906 6. SIC Code
401-453-0038 7. Brief Description of the Chara	icter of Business Conducted	Rhode I	sland		5520
	ease, finance	, develop and op	erate real estate ACHMENT) FILLIN SPACES Vice President Name	BEFORE USING ATTA	CHMENTS
Larry Goldst	ein		Street Address		
244 Gano Str	oot .		•		
City	State	Zip	City	State	Zip
Providence Secretary Name	RI	02906	Ticasuses Name		<i>,</i>
Gene Goldste	in		Street Address		
244 Gano Str	eet State	7.ip	City	State	Zip
Providence 9. NAMES AND ADDRI Director Name	RI esses of the dir	02906 ECTORS ("X" BOX FOR A	TTACHMENT) FILL IN SPACE Director Name	S BEFORE USING AT	
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 AUTHORIZ	ED ("X" BOX FOR ATT	ACHMENT)	11. SHARES ISSUED (* ISSUEDSHARES	X° BOX FOR ATTACHMEN	'T')
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
8,000	Common	\$1.00	None		
•			·	Class/Series	Par Valu

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

FILE) 70, Hy Lo
File Date: FEB 2 1 20	002///
Check No.: By By	200 800 By
Ву:	2030
FOR SECRETARY OF STATE USE ONLY	77

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 for Officer	2/12/2002	
Signature of Officer	Date	

Signature of Office	7	Date	
Larry	Goldstein		

Larry Gordstern	
Print or Type Name of Officer	
D 11 .	

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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 2000 Filing Period: January 1-March 1 • Filing Fee: \$50.00

STOP PILASEREAD INSTRUCTIONS

(FORM MUST BE TYPED IN BL	ACK)				
1. Corporate ID No.	2. Name of Corpora	tion	••	•	. `
100747		Capwell R	ealty, Inc.		
3. Street Address Principal Busines		•	City	State	Zip
244 Gano Stre	et		Providence	RI	02906
4. Rusiness Phone No.		5. State of Incorporation		KI	6. SIC Code
401-453-0038		Rhode	Island		5520
7. Brief Description of the Characte					3320
Buy, sell, le	ase, finance,	develop and op	erate real estate		
8. NAMES AND ADDRES President Name	SSES OF THE OFFI	CERS ("X" BOX FOR ATT		BEFORE USING ATTA	CHMENTS
Larry Goldste	in		•		
Street Address			· Street Address		
244 Gano Stree	et		•		
City	State	Zip	City	State	Zip
Providence	RI	02906			•
Secretary Name		• 67 F 67 F 67 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Treasurer Name		
Gene Goldsteim	า				
Street Address			Street Address		
244 Gano Stree	et				
City	State	Zip	City	State	Zip
Providence	RI	02906			
9. NAMES AND ADDRES	SES OF THE DIRE	CTORS (*X* BOX FOR A	TTACHMENT) FILL IN SPACE	S BEFORE USING AT	TACHMENT'S
Director Name			Director Name		
Change Adding					
Street Address			Street Address		
City	State	•	.		
VII)	Sinte	Zip	. City	State	Zip
Director Name			Market Name		
			Director Name		
Street Address			Street Address		
Gity [,]	State	Zip	City	State	Zip
			·		,
10. SHARES AUTHORIZE AUTHORIZZD SHARES	D (*X* BOX FOR ATTA	CHMENT)	11. SHARES ISSUED (*)	K ^e BOX FOR ATTACHMEN	77)
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
8,000	Common	\$1.00	None		

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

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File Date:	FILED 17 17 17 17 17 17 17 17 17 17 17 17 17	
Check No.:	FEB 2 1 2002	
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.

In Motor 2/12/2002
Signature of Officer Date

Print or Type Name of Officer

President

Title of Officer

Form 630 12/01



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

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. 2. Name of Corporation 100747 Capwell Realty, Inc. 3. Street Address Principal Business Office State Zie 244 Gano Street Providence RI 4. Business Phone No. S. State of Incorporation 401-453-0038 Rhode Island 5520 7. Brief Description of the Character of Business Conducted in Rhode Island Buy, sell, lease, finance, develop and operate real estate 8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS President Name Vice President Name Larry Goldstein Street Address Street Address 244 Gano Street State 2.ip State ZIp Providence RΙ 02906.... Secretary Name Gene Goldstein Street Address Street Address 244 Gano Street Zip City State Zip Providence RI 02906 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 State Zip City State Zip Director Name Director Name Street Address Street Addiess State Zip City State 10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT) 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) AUTHORIZED SHARES ISSUED SHARES Number of Shares Class/Series Par Value Number of Shares Class/Series Par Value 8,000 Common \$1.00 None

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

FILED On My
FEB 2 1 2002
Check No.: By GAA BOO
Ву:
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.

Signary of Officer	2/12/02	
Signatuse of Officer	Date	_
Larry Coldonais		

P	resid	lent
Title of	Officer	

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