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

AMENDED

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.

Name of Corporation: At wells Realty Corp. Business entity organized under the laws of the State of: Rhode Island 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): One Franklin Square Providence, R. I. 02903			Annual Report for the year: 1995 Business Entity is (check one): K Business Corporation (See RIGL Chapter 7-1.1) [Professional Service Corporation (See RIGL Chapter 7-5.1) Brief statement of the character of business conducted in Rhode Island: TO buy and sell and lease Real Estate and operate Restaurants								
						Phone: (401)274-5560					
							E NAM	ES OF THE	OFFICERS ARE		
PRESIDENT		STREET ADDRES		CITY/STATE	ZIP CODE						
Madeline Di Santo	One		n Square,	Providence, R. I							
	0=0	STREET ADDRES	n Square,	Providence, R. I	ZIP CODE						
Madeline Di Santo	one	STREET ADDRES		CITY/STATE	ZIP CODE						
Madeline Di Santo	One		n Square,	Providence, R. I							
TREASURER		STREET ADDRES		CITY/STATE	ZIP CODE						
Madeline Di Santo	One	Frankli	n Square,	Providence, R.I	. 02903						
THE	ENAMI	ES OF THE I	DIRECTORS ARE	E:							
NAME		STREET ADDRES		CITY/STATE	ZIP CODE						
Madeline Di Santo	One	Frankli STREET ADDRESS	n Square,	Providence,R.	T. 02903						
AME		21KEEL ADDKES	.5	CITY/STATE	ZIPCODE						
NAME	STREET ADDRESS		is	CITY/STATE	ZIP COD€						
NUMBER OF SHARES AUTHORIZED (Rider may be attached))	N	TUMBER OF SHARES	ISSUED AND OUTSTANDING (I	Rider may be attached)						
Number of Shares Class / Series Common none no par value			lumber of Shares 100 no pai	Class/Series Common Mon r value,	1995) V 2769						
Date	_	By: Madeline Di Santo PRINT OR TYPE NAME OF OFFICER SIGNING									
Form 31 1/95		TITLE OF OFFICE	ersigningPresid	ent							
DESIGNATED RE	GISTE	RED AGEN	T FOR SERVICE	OF PROCESS:							

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

Madeline Di Santo One Franklin Square Providence, R.I. 02903