Matthew A. Brown, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401.222.3040

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

FOR SECRETARY OF STATE USE ONLY

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2005

FORM MUST BE TY I. ID No.	PED OR PRINTED IN BL. 2. Exact name of the life					
98669	Paolino Realty, LI					
. State of Formation	'	-	e business which is actually conducted	in Rhode Island		
RHODE ISLAN	D REAL ESTA	TE				
. Principal office ad			City	State	Zip	
76 DORRANCE STREET		PROVIDENCE	RI	02903		
	DRESS OF LIMITED	LIABILITY COMP.	ANY AND NAME OR TITLE Contact Title	OF CONTACT PER	RSON:	
Contact Name JOSEPH R PAC	LINO Jr		.member			
Street Address			*City State		Zip	
76 DORRANCE ST.		PROVIDENCE	RI	02903-		
. NAME AND A			LIMITED LIABILITY COM			
		PACES BEFORE USING TO MANAGERS REOL	G_ATTACHMENTS	**************************************		
fanoger Name			• Manager Name			
-			•			
Street Address			· Street Address			
752.	State	7:-	*City	State	Zip	
City	State	Zip	City	Japie	2.10	
Manager Name			Manager Name			
		,		<u> </u>		
Sireei Address			·Street Address			
City	State	Zip	City	State	Zip	
						
B. RESIDENT AG	ENT IN RHODE ISLAN	D -DO NOT ALTER- C	hanges require filing of Fo	orm 642 - R.I.G.L. 7-	-16-11	
JOSEPH R. PA	OLINO JR		76 DORRANCE ST	REET		
1ddress			City Zip		lip	
			PROVIDENCE	PROVIDENCE 0290		
			PROVIDENCE		02903	
This report must	be signed in ink by a	n authorized person	i pursuant to 7-16-66.			
98669 DLLC 09/01/05 02:68:39 PM			this report, includin	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 9 6 0 5			// ^ ~	1000101		

Signature of Authorized Person

Joseph R. Paolino Jr.

Print or Type Name of Authorized Person



Matthew A. Brown, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401,222,3040

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2004 Filing Period: September 1 - November 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK) I. ID No. 2. Exact name of the limited liabilty company 98669 Paolino Realty, LLC 3. State of Formation 4. Brief description of the character of the business which is actually conducted in Rhode Island REAL ESTATE **RHODE ISLAND** 5. Principal office address City State 76 DORRANCE STREET PROVIDENCE RΙ 02903 6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON: Contact Name Contact Title JOSEPH R. PAOLINO, JR. MEMBERS Street Address City State Zip 76 DORRANCE ST. . PROVIDENCE RI 02903 7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE FILL IN SPACES BEFORE USING ATTACHMENTS ("X" BOX FOR ATTACHMENT) ANY MODIFICATIONS TO MANAGERS REQUIRES FILING OF AMENDMENT. R.I.G.L 7-16-12 (a) (2) / 7-16-52 Manager Nami · Manager Name Street Address Street Address City State Zio City State Zip Manager Name Manager Name Street Address Street Address City State Ciry Zip State Zip 8. RESIDENT AGENT IN RHODE ISLAND -DO NOT ALTER- Changes require filing of Form 642 - R.I.GL. 7-16-11 JOSEPH R. PAOLINO, JR. 76 DORRANCE STREET Address Zip **PROVIDENCE** 02903

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

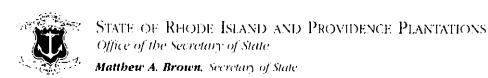


98669 DLLC 09/20/04 10 48 49 AM
File Date
SEP 2 1 2004
Check No.
By A
By
FOR SECRETARY OF STATE USE ONLY

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 Authorized Person Date

Joseph R. Paolino, Jr. Print or Type Name of Authorized Person



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

2003

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR _

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

	OKPRISTED IN BLACK)				
1 ID No.	2 Exact name of the limited h	· ·			
98669	Paolino Realty, LL				··
3 State of Formation	4 Brief description i	of the character of the husiness it	bish is actually conducted in Rhode I	sland	
RHODE ISLAND	REAL ESTATE				
5. Principal office address	•		city	State	79.
76 Dorrance	Street		Providence	RI	02903
6. MAILING ADDRE	SS OF LIMITED LIABILE	TY COMPANY AND NAM	E OR TITLE OF CONTACT P	ERSON:	·
Contact Name			Contact Title		
Joseph R. Paolino & Joseph R. Paolino, Jr.			Members		
Street Address			Cay: Providence	State	Zīp
76 Dorrance	76 Dorrance Street			RI	02903
	FILL IN SPAC	ES BEFORE USING ATTA	BILITY COMPANY, 1F APPLICACHMENTS ("X" BOX FOR ILING OF AMENDMENT, R.I. Manager Name	ATTACHMENT)	7-16-52
Street Address			Street Address		
City	State	Zψ	City	State	Zip
Maninger Name		Manager Name			
Street Address			Street Address		
City	State	Zip	Сиу	State	Ζιρ
8. RESIDENT AGEN Agent Name JOSEPH R. PAOLINO,		O NOT ALTER - Change	s require filing of Form 64 Address	2 - R.I.G.L. 7-16-11	1
Address 76 DORRANCE STREET		PROVIDENCE	7.1p 02903		

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

	* 9	 6 6	9 *
File Date			
Check No			
Bv		 	

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

SEP 12 2003

By 04.455 5

Joseph R. Paolino, Jr.

Print or Type Name of Authorized Person



Edward S. Inman, III, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401.222.3040

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2002

Filing Period: September 1 - November 1 • Filing Fee: \$50.00 (FORM MUST BE TYPED OR PRINTED IN BLACK) I. ID No. 2. Exact name of the limited liability company 98669 Paolino Realty, LLC 3. State of Formation 4. Brief description of the character of the business which is actually conducted in Rhode Island **REAL ESTATE RHODE ISLAND** 5. Principal office address City 76 Dorrance Street Providence RI 02903 6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON: Contact Title Joseph R. Paolino & Joseph R. Paolino, Jr. Members City Street Address 76 Dorrance Street Providence RI 02903 7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE FILL IN SPACES BEFORE USING ATTACHMENTS ("X" BOX FOR ATTACHMENT ANY MODIFICATIONS TO MANAGERS REQUIRES FILING OF AMENDMENT. R.I.G.L 7-16-12 (a) (2) / 7-16-52 Munager Name · Manager Name NONE Street Address Street Address City State Zip State Manager Nume Manager Name Street Address Street Address Cirv State City Zip Zip State 8. RESIDENT AGENT IN RHODE ISLAND -DO NOT ALTER- Changes require filing of Form 642 - R.I.G.L. 7-16-11 Agent Name Address JOSEPH R. PAOLINO, JR. Address **76 DORRANCE STREET PROVIDENCE** 02903

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



9.10.02 20700 File Date Check No. 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 Authorized Profits Nate
T (')
Yoseph R. Paolino, Jr.
Print or Type Name of Authorized Person

Filing Fee: \$50.00

To be filed annually between September 1 and November 1

re 5



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State Corporations Division 100 North Main Street Providence, Rhode Island 02903-1335 Telephone (401) 222-3040

LIMITED LIABILITY COMPANY

ID	Number DLLC 98669	Annual Report for the year 2001
1.	The name of the limited liability comp	pany is:
	Paolino Realty, LLC	
2.	The address of the principal office of	the limited liability company is:
	76 Dorrance Street, Pro	ovidence, RI 02903
3.	The state or other jurisdiction under t	he laws of which it is formed is RHODE ISLAND
4. The name and address of its resident agent is: JOSEPH R. PAOLINO, JR.		
	76 DORRANCE STREET PROVIDE	NCE RI 02903
5.	The current mailing address of the lin	mited liability company and the name or title of a person to whom communications
	may be directed are:Joseph	R. Paolino & Joseph R. Paolino, Jr., Members
	76 Dorn	rance Street, Providence, RI 02903
6.	A brief statement of the character of	of the business in which the limited liability company is actually engaged in this
	state: Real Estate	
7.	If the limited liability company has ma	anagers, the name and address of each manager of the limited liability company **Address**
	NONE	
Da	ated 9/6/0/	Under penalty of perjury, I declare and affirm that I have examined this
	18 (8)81 (8)48 SHIR BING (8)	report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.
		Paolino Realty, LLC
	9 8 6 6 9	Exact Name of Limited Liability Company
T.II.	FOR SECRETARY OF STATE USE ONLY to Date: Q-(()-() /	By Plant
	/ / 0	Member
	eck No.: 19385 : Ze	Title Form No. 632 Revised 01/99
Ву	: Ce	17.641360 01133

DETACH BOTTOM BEFORE RETURNING

By:



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State **Corporations Division** 100 North Main Street Providence, Rhode Island 02903-1335 Telephone (401) 222-3040

LIMITED LIABILITY COMPANY

ID	Number DLLC 98669	Annual Report for the year 2000
1.	The name of the limited liability compar	ny is:
	Paolino Realty, LLC	
2.	The address of the principal office of the	e iimited liability company is:
	76 Dorrance Street, Prov	ridence, RI 02903
3.	The state or other jurisdiction under the	a laws of which it is formed is RHODE ISLAND
4. The name and address of its resident agent is: JOSEPH R. PAOLINO, JR.		
	76 DORRANCE STREET PROVIDEN	ICE RI 02903
5.		ited liability company and the name or title of a person to whom communications
	may be directed are: Joseph R.	Paolino and Joseph R. Paolino, Jr., Memhers
	76 Dorran	ce Street, Providence, RI 02903
6.		the business in which the limited liability company is actually engaged in this
7.	state: Real Estate If the limited liability company has man Name	nagers, the name and address of each manager of the limited liability company Address
	NONE	
Da		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. Paolino Realty, LLC Exact Name of Limited Liebility Company
	FOR SECRETARY OF STATE USE ONLY e Date: eck No.:	By Member Title
Вv	. Chen	Form No. 632 Revised 01/99

Filing Fee: \$50.00



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335

LIMITED LIABILITY COMPANY

טו	Number LL 98669	Annual Report for the y	ear 19 <u>99</u>	
1.	The name of the limited liability company	is:		
	Paolino Realty, LLC			
2.	The address of the principal office of the li	mited liability company is:		
3.	The state or other jurisdiction under the la	ws of which it is formed is: RHODE ISLAND		
4.	The name and address of its resident agent is: Joseph R. Paolino, Jr.			
	76 Dorrance Street, PRovidenc			
5.	The current mailing address of the lincommunications may be directed are:Jo		f a person to whom	
6.	A brief statement of the character of the	business in which the limited liability company is a	ctualiviencaged in this	
	state: <u>Investments</u>			
7.	If the limited liability company has man company	agers, the name and address of each manager	of the limited liability	
	Name	Address		
	Joseph R. Paolino, Jr.	76 Dorrance Street		

Form No. LLC-19 Revised 8/97