



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 02903-1333
401.222.3046

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. 105272 | | 2. Name of Corporation Algab Realty & Holding Company | | | | | |
| 3. Street Address Principal Business Office 300 Pippin Orchard Road | | City Cranston | | State RI | | Zip 02921 | |
| 4. Business Phone No. 331-2720 | | 5. State of Incorporation RHODE ISLAND | | | | 6. SIC Code 0 | |
| 7. Brief Description of the Character of Business Conducted in Rhode Island THE PURCHASE AND SALE OF, AND INVESTMENT IN, REAL ESTATE. | | | | | | | |
| 8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS | | | | | | | |
| President Name Allan D. Goldberg | | | | Vice President Name Gabriela Goldberg | | | |
| Street Address 300 Pippin Orchard Road | | | | Street Address 300 Pippin Orchard Road | | | |
| City Cranston | | State RI | | City Cranston | | State RI | |
| Zip 02921 | | | | Zip 02921 | | | |
| Secretary Name Gabriela Goldberg | | | | Treasurer Name Allan D. Goldberg | | | |
| Street Address 300 Pippin Orchard Road | | | | Street Address 300 Pippin Orchard Road | | | |
| City Cranston | | State RI | | City Cranston | | State RI | |
| Zip 02921 | | | | Zip 02921 | | | |
| 9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS | | | | | | | |
| Director Name Allan D. Goldberg | | | | Director Name | | | |
| Street Address 300 Pippin Orchard Road | | | | Street Address | | | |
| City Cranston | | State RI | | City | | State | |
| Zip 02921 | | | | Zip | | | |
| Director Name | | | | Director Name | | | |
| Street Address | | | | Street Address | | | |
| City | | State | | City | | State | |
| Zip | | | | Zip | | | |
| 10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> | | | | | | | |
| AUTHORIZED SHARES | | | | | | | |
| Number of Shares | | Class/Series | | Par Value | | | |
| 150 NO PAR VALUE | | | | | | | |
| 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> | | | | | | | |
| ISSUED SHARES | | | | | | | |
| Number of Shares | | Class/Series | | Par Value | | | |
| 150 | | common | | no par value | | | |

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



| | |
|---------------------------------|-------------|
| FILED | |
| File Date | FEB 24 2005 |
| Check No. | 1364 |
| By | KB |
| 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 Allan D. Goldberg Date 2/16/05
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
401-222-3046

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.

105272

2. Name of Corporation

Algab Realty & Holding Company

3. Street Address Principal Business Office

300 Pippin Orchard Road

City

Cranston

State

RI

Zip

02921

4. Business Phone No.

331-2720

5. State of Incorporation

RHODE ISLAND

6. SIC Code

0

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

The purchase and sale of, and investment in, real estate

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

President Name

Allan D. Goldberg

Vice President Name

Gabriela Goldberg

Street Address

300 Pippin Orchard Road

Street Address

300 Pippin Orchard Road

City

Cranston

State

RI

Zip

02921

City

Cranston

State

RI

Zip

02921

Secretary Name

Gabriela Goldberg

Treasurer Name

Allan D. Goldberg

Street Address

300 Pippin Orchard Road

Street Address

300 Pippin Orchard Road

City

Cranston

State

RI

Zip

02921

City

Cranston

State

RI

Zip

02921

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

Director Name

Allan D. Goldberg

Director Name

Street Address

300 Pippin Orchard Road

Street Address

City

Cranston

State

RI

Zip

02921

City

City

State

State

Zip

Zip

Director Name

Street Address

City

State

Zip

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

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

150 NO PAR VALUE

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

ISSUED SHARES

Number of Shares

Class/Series

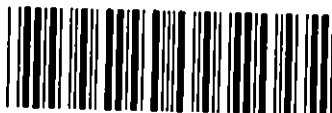
Par Value

150

common

no par value

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



* 1 0 5 2 7 2 *

File Date:

3.6.03

Check No.:

1244

By:

1UP

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

Allan D. Goldberg

Print or Type Name of Officer

President

Title of Officer

Form 630 12/02

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.

105272

2. Name of Corporation

Algab Realty & Holding Company

3. Street Address Principal Business Office

300 Pippin Orchard Road

City

Cranston

State

RI

Zip

02921

4. Business Phone No.

331-2720

5. State of Incorporation

RHODE ISLAND

6. SIC Code

0

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

The purchase and sale of, and investment in, real estate and for any other lawful purpose

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

FILL IN SPACES BEFORE USING ATTACHMENTS

President Name

Allan D. Goldberg

Street Address

300 Pippin Orchard Road

City

Cranston

State

RI

Zip

02921

Secretary Name

Gabriela Goldberg

Street Address

300 Pippin Orchard Road

City

Cranston

State

RI

Zip

02921

Vice President Name

Gabriela Goldberg

Street Address

300 Pippin Orchard Road

City

Cranston

State

RI

Zip

02921

Treasurer Name

Allan D. Goldberg

Street Address

300 Pippin Orchard Road

City

Cranston

State

RI

Zip

02921

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

FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

Allan D. Goldberg

Street Address

300 Pippin Orchard Road

City

Cranston

State

RI

Zip

02921

Director Name

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

150 NO PAR VALUE

Class/Series

Par Value

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

ISSUED SHARES

Number of Shares

150

Class/Series

common

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



* 1 0 5 2 7 2 *

File Date:

2-19-02

Check No.:

1186

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.

Signature of Officer

Allan D. Goldberg

Print or Type Name of Officer

President

Title of Officer

5

Date



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

Corporations Division
100 North Main Street, Providence, RI 02903-1333
401-222-3044



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. **105272** 2. Name of Corporation
Algab Realty & Holding Company

3. Street Address Principal Business Office

300 Pippin Orchard Road

City

Cranston

State

RI

Zip

02921

4. Business Phone No.

331-2720

5. State of Incorporation
RHODE ISLAND

6. SIC Code
6

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

The purchase and sale of, and investment in, real estate and for any other lawful purpose

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

President Name

Allan D. Goldberg

Street Address

300 Pippin Orchard Road

City

Cranston

State

RI

Zip

02921

Vice President Name

Gabriela Goldberg

Street Address

300 Pippin Orchard Road

City

Cranston

State

RI

Zip

02921

Secretary Name

Gabriela Goldberg

Street Address

300 Pippin Orchard Road

City

Cranston

State

RI

Zip

02921

Treasurer Name

Allan D. Goldberg

Street Address

300 Pippin Orchard Road

City

Cranston

State

RI

Zip

02921

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

Director Name

Allan D. Goldberg

Street Address

300 Pippin Orchard Road

City

Cranston

State

RI

Zip

02921

Director Name

Street Address

City

State

Zip

Street Address

City

State

Zip

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

AUTHORIZED SHARES

Number of Shares

150 NO PAR VALUE

Class/Series

Par Value

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

ISSUED SHARES

Number of Shares

150

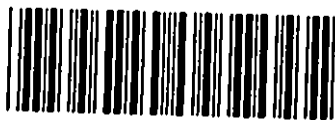
Class/Series

common

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.



* 1 0 5 2 7 2 *

File Date:

1/25/01

Check No.:

1112

By:

AG

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

Allan D. Goldberg

Print or Type Name of Officer

President

Title of Officer

Date

1/16/01



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
401-222-3044

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.

105272

2. Name of Corporation

Algab Realty & Holding Company

3. Street Address Principal Business Office

30 Pinewood Drive

City

North Providence

State

RI

Zip

02904

4. Business Phone No.

331-2720

5. State of Incorporation

RHODE ISLAND

6. SIC Code

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

The purchase and sale of, and investment in, real estate and for any other lawful purpose

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

President Name

Allan D. Goldberg

Vice President Name

Gabriella Goldberg

Street Address

30 Pinewood Drive

Street Address

30 Pinewood Drive

City

North Providence RI

Zip

20904

City

North Providence RI

State

RI

Zip

02904

Secretary Name

Gabriella Goldberg

Treasurer Name

Allan D. Goldberg

Street Address

30 Pinewood Drive

Street Address

30 Pinewood Drive

City

North Providence RI

Zip

02904

City

North Providence RI

State

RI

Zip

02904

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

Director Name

Allan D. Goldberg

Director Name

Street Address

30 Pinewood Drive

Street Address

City

North Providence RI

Zip

02904

City

North Providence RI

State

RI

Zip

Director Name

Director Name

Street Address

Street Address

City

City

State

State

Zip

Zip

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

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

150 NO PAR VALUE

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

ISSUED SHARES

Number of Shares

Class/Series

Par Value

150

common

no par value

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



* 1 0 5 2 7 2 *

File Date:

2/3/00

Check No.:

1075

By:

AG

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

Allan D. Goldberg

Print or Type Name of Officer

President

Title of Officer

