

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

Matthew A. Brown, Secretary of State

Corporations Division 100 North Main Stree Providence, Rt 02903-133 401-222,304

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

2005

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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

Date

Allan D. Goldberg

Print or Type Name of Officer

President

Title of Officer

Form 630 Rev. 12/03

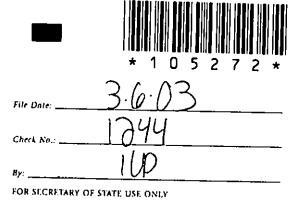
Edward S. Inman, III. Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3046

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

STOP PULIME READ INSTRUCTIONS

1. Composer ID No. 2. Name of Composition 105272 Algab Realty & Holding Company 30. Prippin Orchard Road Cranston RI 0292 Cranston RI 02921 Cranston RI 0292	
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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 statement contained free in are true and correct

Signature of Officer

Print or Type Name of Officer

President
Title of Officer

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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 ANNHAL



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3. Street Address Principal Busin	ress Office	a riolaling Company			
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This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



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that all statements contained herein are true and effect	
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Allan D. Goldberg	
rint or Type Name of Officer	

President Title of Officer <##> 5 Form 630 12/01

Corporations Divisio 100 North Main Street, Providence, RI 02903-133 401-222-304

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105272	2. Name of Corps Algab R	^{ration} Balty & Holding		•	
3. Street Address Principal Busi	iness Office	a notalli			
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4. Business Phone No.	orchard Moad	5. State of Incorpora	Cranston	n RI	02921
331-2720		RHODE IS	LAND		6. SIC Code
7. Brief Description of the Char.	acter of Business Conducted	in Rhode Island			J
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Secretary Name			Treasurer Name	RI	02921
Gabriela Go]	ldberg		Allan D.	Goldhara	
• •	D1 1 5 5 .		Street Address	gordberg	
City	Orchard Road	300 Pippin Orchard Road		In Orchard Road	•
Cranston	State	Zip	City	State	Zip
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9. NAMES AND ADDRI	PRINT OF THE DIKE	CTORS (*X* BOX FOR)		CES BEFORE USING ATT	ACHMENTS
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CHy	State	Zip	City	e	
Cranston	RI	02921	- ,	State	Zip
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This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee.

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· Check No.:	1117
Ву:	Cor
FOR SECRETARY	OF STATE USE ONLY

Under penalty of perjury, Jog lare and affirm that I have examined this report, including any agrompanying schedules and statements, and that all statements contained begin are true and correct.

no par value

Allan D. Goldberg Print or Type Name of Officer

President

Title of Officer

James R. Langevin, Secretary of Sta. Corporations Divisio 100 North Main Street, Providence, RI 02903-135 401-222-304

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000 Filing Period: January 1-March 1 . Filing Fee: \$50.00

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1. Corporate ID No.	2. Name of Corporation				
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3. Street Address Principal Business O	ffice		City	State	Zip
30 Pinewood Driv	re		North Providence	RI	02904
4. Business Phone No.		5. State of Incorporation	north froylatinet	MI	6. SIC Code
331-2720		RHODE ISLAND			5.5.5 5521
7. Brief Description of the Character o	f Business Conducted in Rh	ode Island			
The purchase and	sale of, and	investment in,	real estate and for	any other law	ful nurnoea
8. NAMES AND ADDRESSI President Name	ES OF THE OFFICE	RS ("X" BOX FOR ATTACH	MENT) FILL IN SPACES BEF	ORE USING ATTACHM	ENTS
Allan D. Goldber	8		Gabriella Goldber	g	
30 Pinewood Driv	e		30 Pinewood Drive	.	
City	State	Zip ·	City	State	Zip
North Providence Secretary Name	RI	20904	North Providence	RI	02904
Gabriella Goldbe	rg		Allan D. Goldberg		
30 Pinewood Driv	e		30 Pinewood Drive		
City	State	Zip	City	State	ZIp
North Providence	–	02904	North Providence	RI	02904
9. NAMES AND ADDRESSE	S OF THE DIRECT	ORS ("X" BOX FOR ATTAC		EFORE USING ATTACH	
Director Name			Director Name		
Allan D. Goldber	g				
Street Address			Street Address		
30 Pinewood Driv					
City	State	Zip	Cuy	State	Zip
North Providence	RI	02904			
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	Gity	State	Zip
10. SHARES AUTHORIZED	(*X* ROX FOR ATTACHN	(ENT)	11. SHARES ISSUED (*X* BO	OX FOR ATTACHMENT)	
Number of Shares	Class/Series	Par Value	ISSUED SHARES Number of Shares	Class (Sadas	
	•		reminer of shores	Class/Series	Par Value

President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

150

Title of Officer

Under penalty of perjury, I declare and affir	m that I have examined
this report, including any accompanying sci	hedules and statements, ar
that all statements contained herein are true	e and correct,
ule gr	-1/4/00
Signature of Officer	Date
Allan D. Goldberg	·
Print or Type Name of Officer	
President	

common

no par value