

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

Matthew A. Brown, Secretary of State

Corporations Duession 100 North Main Street Providence, RI 02903-1335.

401 222 3040

#### PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

Filling Period: January 1	- March 1 💮 🔹 🗀	NNUAL REPO	RT FOR THE YEAR	200	)5
FORM MUST BE TYPED OR P  C sporate ID No	RINTED IN BLACK)  2 Name of Corpo				
71681	1 ' '	BANDIAN REALTY, INC.			
Street Address Principal Busin	ess Office		Cup	State	Zip
	ost Road P	7.	East Greenwich	RI	02818
Business Phage No.	15-5020	5 State of Incorporati	on ————————————————————————————————————		6 SIC Code
Biref Description of the Charac	ter of Business Conducti	RHODE ISLAN	NDON	<u>.</u>	5538
BUYING AND SELLIN	IG OF COMMERCIA	L REAL ESTATE.			
. NAMES AND ADDRESS OCCUPANY NAME  Jack N	ses of the offic falbandian	ERS: ("X" BOX FOR A	TTACHMENT) ☐ FILL IN SP  Vuc President Name None	ACES BEFORE USIN	G ATTACHMENTS
595 Al	gonquin Dr	ive	Street Address		
warwick	<sup>M</sup> RI	<sup>∠p</sup> 02888	. City	State	Ziji
Cician Name			Treasurer Name		······································
reet Address	<u>-</u>		Street Address		
(b)	Neue	Zip	Gtγ	State	Zψ
595 A	Malbandian Lgonquin Dr		Martin Nalk Street Address 45 Kettle Cou	urt	
" Warwick 	K1	<sup>χφ</sup> 02888	Overtor Name	own RI	∕ <b>6</b> 2852
Margare	t Nalbandia	ın	Partial ding		
cet Address			Street Address	<del></del>	٠.
	<u>lgonguin Dr</u>				
Warwick D. SHARES AUTHORIZE	R.I.	02888	Cits	Mate	Zφ
JIHORIZED SHARES	b ( A BOATOR	ATTACHMENT)	11. SHARES ISSUED ("X	BOX FOR ATTACE	MENI) [ .
unber of Shares	Ciassisones	Par Value	Number of Shares	Class/Sories	Par Value
1,000 NO PAR VALUE			500	Common	No Par
-					
This report must b	e signed in ink by	either the President, Vic	e President, Secretary, Assistant	Secretary, Treasurer,	Receiver or Trustee
					that I have examined this itements, and that all stat
ile Date	05		contained herein are tru	ne and correct	1-18
	\$1.	-	Signature of Officer	1 202 - 0 4 24	Date 1

FOR SECRETARY OF STATE USE ONLY

Signatur of Officer

Jack Nalbandian

Print or Type Name of Officer President

Title of Officer

Form 630 Rev. 12/03



FOR SECRETARY OF STATE USE ONLY

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State Matthew A. Brown, Secretary of State

Corporations Dielsion 100 North Main Street Providence, RI 02903-1335

401.222.3040

F NOFTE CORP Filing Period: January 1 - (FORM MUST HE TYPED OR PR	March 1 • Filin	NUAL REPU! ig Fee: \$50.00	RT FOR THE YE	AR200	<u> 14</u>
1 Corporate ID No	2. Name of Corporatio			<del></del> .	
71681	i i	" NDIAN REALTY, INC.			
3. Street Address Principal Busine 5661 Post I	s Office		City East Greenv	State Vich RI	<i>Ζίρ</i> 02818
4. Business Phone No 401-885-502		5. State of Incorporate	OH		6 SIC Cixle
7. Brief Description of the Charact	•	RHODE ISLAI	ND		.5538
BUYING AND SELLIN	IG OF COMMERCIAL R	REAL ESTATE.			
B. NAMES AND ADDRESS	ES OF THE OFFICERS	6: ("X" BOX FOR A	. –	N SPACES BEFORE USING	G ATTACHMENTS
Pasident Name Jack	. Nalbandian		Vice President Name		
Street Address	- warbanaran	<del></del>	Street Address	· ····	
	Algonquin Di	rive			
cuv Warwick	State	Zip	City	State	Zip
Secretary Name	RI	02888	Treasurer Name		
Street Address		<u></u>	Street Address		
None None	State	Zip		lone	· T
···.·	ant	24	City	State	Zip
D. NAMES AND ADDRESSI Director Name	ES OF THE DIRECTO	RS: ("X" BOX FOR	ATTACHMENT) FILL Director Name	IN SPACES BEFORE USI	NG ATTACHMENTS
Jack	: Nalbandian		<u>Martin Nal</u>	bandian	
	Algonquin Dr	-ive	Street Address 45 Kettle Co		
Warwick	State RI	2(p 02888	City North Kingst	State	Zip 02852
Director Name	k		Director Name		
<del></del>	aret Nalband	lian ———————			
Sinci Addres 595	Algonquin Dr	ive	Street Address		
Warwick	State RI	2ip 02888	City	State	Ζψ
O. SHARES AUTHORIZED	O ("X" BOX FOR ATT	TACHMENT)	11. SHARES ISSUED	("X" BOX FOR ATTACH	MENT)
Number of Shares	Class/Scries	Par Value	Number of Shares	Class/Series	Par Value
1,000 NO PAR VALUE			500	Common	No Par
	<u>.                                    </u>				
This report must be	e signed in ink by eith	er the President, Vic	c President, Secretary, Assis	tant Secretary, Treasurer,	Receiver or Trustee
* FILE		<b>"</b> 	including any acco	perjury, I declare and affirm the companying schedules and state are true and correct.	
File Date			_aah	Dellom	6-17-04
Check No JUN 21	2004		Signafike of Officer		Date
		$\langle  $	Jack Nalb		
By \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\			Print or Type Name	oj Ujjicer	

President

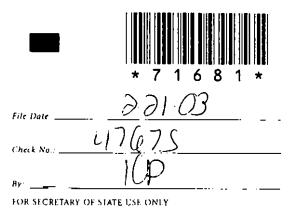
Edward S. Inman, III. Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

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

FORM MUST BE TYPED OR PRINTED IN BLACKS 1. Corporate ID No. 1 2 Name of Corporation 71681 J & M NALBANDIAN REALTY, INC. 3. Street Address Principal Business Office City State 210 5661 Post Road, PO Box 71 East Greenwich, RI 02818 4. Business Phone No. 5 State of Incorporation 6 SIC Code 401-885-5020 **RHODE ISLAND** 5538 7. Brief Description of the Character of Business Conducted in Rhode Island Buying and selling of commercial real estate 8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) **FILL IN SPACES BEFORE USING ATTACHMENTS** President Name Jack Nalbandian none Street Address Street Address 595 Algonquin Drive City State Zip Warwick RΙ 02888 Secretary Name Treasurer Name None None Street Address Street Address City State Zip City State Lip 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Director Name Director Name Jack Nalbandian Martin Nalbandian Street Address 595 Algonquin Drive 45 Kettle Court cuy Warwick <sup>Zip</sup>02888 Zip 02852 N. Kingstown Director Name Director Name Margaret Nalbandian Street Address Street Address 595 Algonquin Drive Zip City State 2.10 Warwick RI 02888 10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) AUTHORIZED SHARES ISSUED SHARES Number of Shares Class/Series Number of Shates Class/Series Par Value 1,000 NC PAR VALUE 500 No Par Common

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

critical, S



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

Jack Nalbandian	
Print or Type Name of Officer	 
President	

Title of Officer Lana 630 12/02

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



**	,	1 111/2 1 11. 3.50.00			INSTR
FORM MUST BE TYPED IN	i Blacki				
1. Corporate ID No	2 Name of Corporati	un .			<u> </u>
71681		ANDIAN REALTY, INC.			
3. Street Address Principal Bus	mess Office		City	State	Zip
5661 Post 4 Business Phone No	Road, POBox	71 5 State of Incorporation	East Greenwich	RI	02818 6. SIC Code
401-885-50 7 Brief Description of the Cha	020 racter of Business Conducted in	RHODE ISLAND Rhode Island			5538
Buying and	d selling of a	commercial rea	al esatte		
8. NAMES AND ADD! President Name	RESSES OF THE OFFIC	ERS ("X" BOX FOR ATTACE	HMENT) FILL IN SPACES BE Vice President Name	FORE USING ATTAC	HMENTS
Jack Nalba	andian		None		
Street Address	quin Drive		Street Address		
Warwick	State R I	<sup>Zip</sup> 02888	Caty	State	Zip
Secretary Name			Treasurer Name		
None	9		None	<b>1</b>	
Street Address			Street Address	•	
Сиу	State	Zip	City	State	Zip
9. NAMES AND ADDI	RESSES OF THE DIREC	CTORS ("X" BOX FOR ATTA	CHMENT) FILL IN SPACES E	BEFORE USING ATTA	CHMENTS
Jack	Nalbandian		Martin Nall	oandian	
5 <b>95</b> .	Algonquin Dr.	Zip	45 Kettle (		
Warwick	R.I.	02888 .	N. Kingston	State R.I.	<sup>Ζιρ</sup> 02852
Margaret	Nalbandian		The state of the s		
itreet Address			Street Address		
595 Ale	gonquin Dr.				
lity	State	Zip	Cay	State	Zip
Warwick	R.I.	02888			
IO. SHARES AUTHORI MUTHORIZED SHARES	ZED ("x" box for attac	HMENT)	11. SHARES ISSUED ("X" ) ISSUED SHARES	BOX FOR ATTACHMENT)	
Sumber of Shures	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1,000 NO PAR VALUE			500	Common	No Par

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



Stee Date	-2C0-02	
Check No	1.250	 
	<u> </u>	 

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

Signification 3-25.02

Pack Nalhandian

Front or Type Name of Officer

President

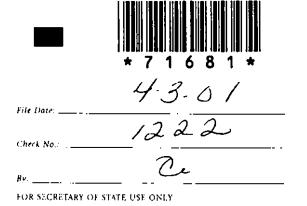


## PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001 Filing-Period: January 1-March 1 • Filing Fee: \$50.00

STOP PLEASE READ INSTRUCTIONS

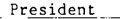
FORM MUST BE TYPED II	N BLACK)				
1. Corporate 1D No. <b>71681</b>	2. Name of Corporatio J & M NALBi	" Andian Realty,	INC.		
3. Street Address Principal Bu	siness Office		City	State	Zip
5661 Post 4 Business Phone No. 401-885-50	Road, PO Box	71 5 State of Incorporation RHODE ISLA		RI	02818 6 SIC Code 5538
	gracter of Business Conducted in F		al estate		
8. NAMES AND ADD	RESSES OF THE OFFIC	ERS ("X" BOX FOR ATTA	ACHMENT) FILL IN SPACES BI	EFORE USING ATTACE	IMENTS
President Name Jac	k Nalbandian		Vice President Name None		
Street Address 595 Algonqu	in Drive		Street Address		
City G = 1	State	Zip	City	State	Zip
Warwick	RI	02888			
Secretary Name			Treasurer Name		
Non	e		None		
Street Address			Street Address		
City	State	Zip	Сиу	State	Zip
9. NAMES AND ADD	PRESSES OF THE DIREC	TORS ("X" BOX FOR A	ITACHMENT) FILL IN SPACES Director Name	BEFORE USING ATTA	CHMENTS
Jack Street Address	Nalbandian		Martin Nalba Street Address	ndian	i same
595	Algonquin Dr.		45 Kettle Co	urt	
City	State	Zip	City	State	Zip
Warwick Director Name	R.I.	02888	N.Kingston Director Name	R.I.	02852
Margare	t Nalbandian				
Street Address	_		Street Address		
-	onquin Dr.				
City	State	Cip	City	State	Zıp
	R.I. NIZED ("X" BOX FOR ATTAC	02888 HMENT)	11. SHARES ISSUED CX	* BOX FOR ATTACHMENT)	
AUTHORIZED SHARES  Number of Shares	Cluss/Series	Par Value	ISSUED SHARES	Class (Fee	from 150 billion
		sas varae	Number of Shates	Class/Series	Par Value
1,000 SHS NO	PAR VALUE		500	Common	No Par

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.

Signature of Officer	3-30-01
Signature of Officer	Date
Jack Nalbandian	



(FORM MUST BE TYPED IN BLACK)

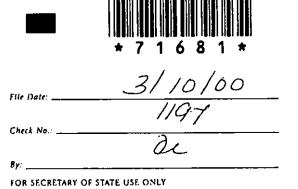
James R. Langevin, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

## PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000

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

71681	J & M NAI				
3. Street Address Principa	l Business Office	-	City	State	Zip
5661 E. Business Phone No.	post Road, PO	Box 71 s. State of Incorporation RHODE ISLAN		n RI	02818 6. SIC Code 5538
401-885 7. Brief Description of the	5-5020 Character of Business Conducted				
8. NAMES AND A President Name	& Selling of DDRESSES OF THE OFF albandian	commercial rea PICERS (*x* BOX FOR ATTA	l estate CHMENT) FILL IN SPACES I Vice President Name None	BEFORE USING ATTAC	HMENTS
Street Address			Street Address		
595 Ali	gonquin Drive	Zíp	City	State	Zip
Secretary Name		02888	Treasurer Name		
Street Address	None		None Street Address		
City	State	Zip	City	State	Zip
·	State DDRESSES OF THE DIF	·		State ES BEFORE USING ATTA	
9. NAMES AND A	• • •	·	TACHMENT) FILL IN SPACE		
9. NAMES AND A Director Name	• • •	·	TACHMENT) FILL IN SPACE Director Name		
9. NAMES AND A Director Name Street Address	DDRESSES OF THE DIE	RECTORS (*X* BOX FOR AT	TACHMENT) FILL IN SPACE Director Name Street Address	ES BEFORE USING ATTA	ACHMENTS
9. NAMES AND A Director Name Street Address City	DDRESSES OF THE DIE	RECTORS (*X* BOX FOR AT	TACHMENT) FILL IN SPACE  Director Name  Street Address  City	ES BEFORE USING ATTA	ACHMENTS
9. NAMES AND A Director Name Street Address City Director Name	DDRESSES OF THE DIE	RECTORS (*X* BOX FOR AT	TACHMENT) FILL IN SPACE  Director Name  Street Address  City  Director Name	ES BEFORE USING ATTA	ACHMENTS
9. NAMES AND A Director Name Street Address City Director Name Street Address City 10. SHARES AUTI	ADDRESSES OF THE DIE	RECTORS (*X* BOX FOR AT	TACHMENT) FILL IN SPACE  Director Name  Street Address  City  Director Name  Street Address	State	Zip Zip
9. NAMES AND A Director Name Street Address City Director Name Street Address	State	RECTORS (*X* BOX FOR AT	TACHMENT) FILL IN SPACE Director Name  Street Address  City  Director Name  Street Address  City  11. SHARES ISSUED (	State	Zip Zip
9. NAMES AND A Director Name Street Address City Director Name Street Address City 10. SHARES AUTI AUTHORIZED SHARES Number of Shares	State  State  HORIZED (*X* BOX FOR AT	ZIP  ZIP  ZIP	TACHMENT) FILL IN SPACE Director Name  Street Address  City  Director Name  Street Address  City  11. SHARES ISSUED (*1880)	State  State  State	Zip Zip

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.

3-7-00
Date

Jack Nalband<u>ian</u> Print or Type Name of Officer

President



James R. Langevin, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

### PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1999

STOP PLEASE READ INSTRUCTIONS

Filing Period: Janua	ry 1-March 1 • Fi	ling Fee: \$50.00			INSTRUCTION
(FORM MUST BE TYPED IN B 1 Corporate ID No. 71681	2 Name of Corporation	NDIAN REALTY, INC	<b>.</b>		
3. Street Address Principal Busine		·	City	State	Zip
5661 Post		DUODE ISLAND	East Greenwich	RI	02818 6 SIG Code
401 - 885 - 5 7 Brief Description of the Character	5020 ter of Business Conducted in Rh	ode Island			5538
Buying at 8. NAMES AND ADDRI	nd selling of ESSES OF THE OFFICE	commercial re R\$ ("X" BOX FOR ATTACHN	eal estate MENT) FILL IN SPACES BE Vice President Name	FORE USING ATTAC	HMENTS
Jack Nall	oandian		None	1	
	nquin Drive		Street Address		
Warwick,	State R I	<sup>Zip</sup> 02888	Cuy	\$tate	Zsp
Secretary Name	None	•	Treasurer Name		
Street Address	Notice		Street Address	None	
City	State	Zip	City	State	Zip
9. NAMES AND ADDRE	SSES OF THE DIRECT	ORS ("X" BOX FOR ATTAC	HMENT) FILL IN SPACES B	EFORE USING ATTA	CHMENTS
Jack Nal	bandian		Martin J. N	albandian	-
595 A	lgonquin Dr.  State	Zıp	45 Kett	le Court	Zip
Warwick Director Name	R.I.	02888	N. Kingstons	R.I.	02852
Margaret 1	Nalbandian		Street Address		
595 Algone					
Warwick	State R.I.	02888	City	State	Zip
10. SHARES AUTHORIZ AUTHORIZED SHARES	ED (*x* box for attach:	MENT)	11. SHARES ISSUED (*x* )	BOX FOR ATTACHMENT.	)
Number of Shares	Class/Series	Par Value .	Number of Shates	Class/Series	Par Value
1,000 SHS NO PAF	R VALUE		500	Common	No ParValue

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



File Date:	011-13-99
Check No.:	1168
By:	<i>30</i>
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	4-9-99
lack Nalbandian	

Jack Nalbandian
Print or Type Name of Officer



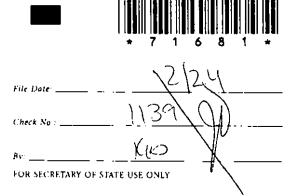
James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-277-3040

## PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1998 Filing Period: January 1-March 1 • Filing Fee: \$50.00

STOP
PLLASE READ
INSTRUCTIONS

FORM MUST BE TYPED IN BI	LACK)				
1 Corporate ID No.	2. Name of Corporati	on			
71681	J & M NALB	ANDIAN REALTY, INC	<b>)</b> .		
3. Street Address Principal Busine	·		City	State	Zip
5661 Po	st Road, PO	Box 71	East Greenwich	RI	02818
4 Business Phone No. (401) 885-5020		5 State of Incorporation RHODE ISLAND	)		6 SIC Code <b>5538</b>
7. Brief Description of the Charac Buying a		Rhode Island  commercial real e	estate		
8. NAMES AND ADDRE	SSES OF THE OFFIC	CERS ("X" BOX FOR ATTACH.	MENT) Vice President Name		
	Nalbandian				
Street Address	vandandian		NONE Street Address		
595 Alg	onquin Drive	Zip	City	State	Zip
Warwick, Secretary Name	RI	02888	Treasurer Name		
Street Address	none		Street Address		
City	State	zip	City	State	Zıp
9. NAMES AND ADDRE	SSES OF THE DIREC	CTORS (*X* BOX FOR ATTAC	CHMENT)  Director Name		
Jack Nalban	dian		Martin J. 1	Nalbandian	
595 Algonqu	in Dr.	Zip	45 Kettle	e Court	7:-
Warwick Director Name	R.I.	02888	N. Kingston Director Name	R.I.	02852
Margaret N	Malbandian		Street Address		
595 Algon	quin Dr.				
Warwick	State R.I.	zip 02888	City	State	Zıp
10. SHARES AUTHORIZ			11. SHARES ISSUED ("X" )	BOX FOR ATTACHMENT)	
Number of Shares	Class/Series	Par Value	ISSCED SHARES  Number of Shares	Class/Series	Par Value
1,000 SHS NO PAR	VALUE		500	Common '	No Par

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.

Signafure of Officer	2-20 - 98
Signature of Officer	Date
Icale Malhamatic	

Print or Type Name of Officer

President

President

lames R. Langevin, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-277-3040

#### PROFIT CORPORATION ANNUAL REPORT 1997

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 71681

2. Name of Corporation

J & M NALBANDIAN REALTY, INC.

3. Street Address Principal Business Office

5661 Post Road, P.O. Box 71

East Greenwich

State

Zip

4. Business Phone No.

State of Incorporation

RΙ

02818 6 SIC Code

401-885-5020

**RHODE ISLAND** 

5538

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

Buying and selling of commercial real estate 8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT)

President Name

Vice President Name

Jack Nalbandian Street Address

Street Address

Director Name

Street Address

City

595 Algonquin Drive

State

Street Address

Margaret Nalbandian

City

City

595 Algonguin Dr. State

Zip

Warwick

02888

Warwick

R.I.

02888

Secretary Name

Margaret Nalbandian

Street Address

Treasurer Name

Jack Nalbandian

R.I.

595 Algonquin Dr.

State

R.I.

595 Algonquin Dr.

State

02888

/ip

02888 Warwick 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT)

RI

Warwick

Jack Nalbandian

595 Algonquin Dr.

State

Martin Nalbandian

Street Address

45 Kettle Court

Zip

City Warwick

City

State

R.I.

R.I.

02852

Director Name

02888

N.Kingston Director Name

Margaret Nalbandian

Street Address

City

Street Address

595 Algonquin Dr.

State

City

State

Warwick

R.I.

02888

10. SHARES AUTHORIZED AND ISSUED ("X" BOX FOR ATTACHMENT)

AUTHORIZED SHARES Number of Shares

Class/Series

Por Value

ISSUED SHARES Number of Shares

Class/Series

Par Value

1,000 SHS NO PAR VALUE

1500

Common

No Par Value

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



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

Jack Nalbandian

Jack Nalbandian Print or Type Name of Officer

Title of Officer

President

## PROFIT CORPORATION ANNUAL REPORT

2. NAME OF CORPORATION

1996

PLEASE TYPE OR PRINT IN BLACK INK.



State of Rhode Island and Providence Plantations
James R. Langevin, Secretary of State
Corporations Division

100 North Main Street Providence, Rhode Island 02903-1335 • (401) 277-3040

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

1. CORPORATE ID NO

71681 J & M NALBANDIAN REALTY, INC. 3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE 73P CODE 109 Airport Rd. Warwick R.I. 02889 4. BUSINESS PHONE NO. 5 STATE OF INCORPORATION 6. SIC CODE RHODE ISLAND (401) 885-5020 5538 7 BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHOOE ISLAND Buying and selling of commercial real estate. ADDRESSES OF THE OFFICERS PRESIDENT NAME Jack Nalbandian Margaret Nalbandian STREET ADDRESS Algonquin Drive 595 Algonquin Dr. 02888 02888 Warwick RI Warwick R.I. SECRETARY NAME TREASURER NAME Margaret Nalbandian Jack\_Nalbandian Algonquin Dr 595 Algonquin Dr. STATE ZIP CODE ,02888 02888 R.I. AMES AND ADDRESSES OF THE DIRECTORS DIRECTOR NAME DIRECTOR NAME Jack Nalbandian Martin Nalbandian STREET ADDRESS 45 Kettle Court 595 Algonguin Dr. N. Kingston 02852 DIRECTOR NAME DIRECTOR HAME Margaret Nalbandian STREET ADDRESS STREET ADDRESS 595 Algonquin Dr. Warwick R.I. **AUTHORIZED SHARES** ISSUED SHARES CLASS / SERIES **MUMBER OF SHARES** MUMBER OF SHARES CLASS / SERIES 1000 shs common no par 1,000 SHS NO PAR VALUE This report must be SIGNED IN INK by either the

File Date: 3 | 8 | 9 | 6

Check No: 10 95

By:

For Secretary of State Use Only

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

Signa(ule of Officer

Jack Nalbandian

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.

Print or Type Name of Officer

President

3-14-96

Title of Officer

Date

# 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

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.

00/1681	1995	
Corporate ID:	Annual Report for the year:	
J & M NALBANDIAN REA	ALTY, INC.	
Name of Corporation:		
Business entity organized under the laws of the State of: Rhode Islan	nd Business Entity is (check one):	
For foreign entity, address and telephone number of principal office:	[X ] Business Corporation (See RIGL Chapter 7-1.1)	
	[ ] Professional Service Corporation (See RIGL Chapter	r 7-5 1)
N/A		,
	Brief statement of the character of business conducted in R	Rhode Island:
Phone: (	Buying and selling of commerc	ial
Address and telephone of the principal office of business entity in Rhode	real estate	
Island (Provide street address - Not P.O. Box):		
109 Airport Road	•	
Warwick, RI 02889	·	
Phone: (401) 739-1011		
	<u> </u>	
PRESIDENT THE NAMES OF	THE OFFICERS ARE:	
Jack Nalbandian 595 Algor	ADDRESS Iquin Dr. Warwick R.I. 02888	ZIP CODI
	_	
518221	ADDRESS CHY/STATE	ZIF CODE
<u>Margaret Nalbandian</u> 595 Algor	nquin Dr Warwick, R.I. 028	3 <u>88                                   </u>
SIRE	ADDRESS CHY/STATE	ZIP CODE
Margaret Nalbandian Same	ADDRESS CITY/STATE	
Since 1	ADDRESS CITY/STATE	ZIP CODE
	<u> </u>	<u> </u>
NAME THE NAMES OF	THE DIRECTORS ARE:  ADDRESS CHLYSTATE	<del></del>
		ŽIP CODE
<u>Martin Nalbandian</u> 45 Kettle C	Ourt N. Kingston R.I. 0285	_:
216117	ADDIGES CHESTARE	Z:P CODE
NAME STREET	ADDRESS CITYSTATE	
	CUTSTALE	ZIP CODE
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Number of Shares Class / Series	Name of Classics	<del></del> ··
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Date February 95 By.	Jack nothing	
	(Jack Nalbandian	
PRINTO	R TYPE AME DECORTOR NOME.	
—— —— ·—— ·—— ·—— · —— ·	FOFFICER SIGNING	
DESIGNATED REGISTERED A	GENT FOR SERVICE OF PROCESS:	
PLEASE NOTE: If the registered office and/or registered agent indicated bel		
	* 5 <del>=</del>	

SIDNEY W. PAULL 109 AIRPORT ROAD WARWICK RI 02889

FILED MAR 0 2 1995 V 10 1056 Filing Fee \$50.00 Payable to: Secretary of State

#### PLEASE TYPE or PRINT

File Annually LEC Sept. 1 - Nov. i CORP, Jan. 1 - March I

## State of Rhode Island and Providence Plantations Office of The Secretary of State 100 North Main Street

100 North Main Street Providence, Rhode Island 02903-1335 401-277-3040

Corporate ID: 0071581	Annual Report for the year: 1394
Name of Business Entity:	J & M NALEANDIAN REALTY, INC.
Business entity organized under the laws of the State of Rhoco. Is La	Business Entity is (check one).
	[ *] Business Corporation (See RIGL Chapter 7-1-1)
Federal Taxpayer Identification Number	[ ] Professional Service Corporation (See RIGL Chapter 7-5.1)     [ ] Lamited Liability Company (See RIGL 7-16)
For foreign entity, address and telephone number of principal office:	Name, title and mailing address of contact person to whom
	communications may be directed:
	Jack_Nalbandian (president)
Phone: ()	595 Algonquin Dr
Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box)	<u>Warwick, R.I. 02888</u>
595 Algonquin Dr.	Brief statement of the character of business conducted in Rhode Island
Warwick, R.I. 02888	Buying and Selling of Commercial  Real Estate.
MAINICK, R.I. UZUOU	Date of Organization March 3, 1993
Phone (401) 463-8053	Date of Qualification to do business in Range Island (if foreign entity)
	<u> </u>
	OF THE OFFICERS ARE:
	5 Algonquin Dr. Warwick R.I. 02888
TO REPOPERATING OFFICER OR [] VK (PRESIDESTRONGLOS). ST	RESTADORESS CITY/STATE ZPECHOO
	5 Algonquin Dr. Warwick, R.I. 02888
Margaret Nalbandian "	
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NAME  NAME  NAME  NAME  NUMBER OF SHARES AUTHORIZED (If Applicable)  NUMBER 1000  CLASS Common  SERIES  PAR VALUE OR WITHOUT PAR no par value  Date MARCH 11 19 94  E  DESIGNATED REGISTERED OR E	NUMBER OF SHARES ISSUED AND OUTSTANDING (If Applicable)  NUMBER 1000  CLASS  COMMON  SERIES  PAR VALUE OR WITHOUT PAR  NO par value  J & M NALBANDIAN REALTY, INC.  Pack Naibandian  ENTERTYPE NAME OF OUR OF MICH. SERVICE OF PROCESS: Inclor registered or resident agent, Form 9 or Form LLC 3 must be filed  Jack Naibandian  MAR 2 4 (7.3)
NUMBER OF SHARES AUTHORIZED (If Applicable)  NUMBER 1000  CLASS Common  SERIES  PAR VALUE OR WITHOUT PAR no par value  Date MARCH 11 19 94 H	DOUGH ADDRESS  CHYSTATE  C