



State of Rhode Island

## Department of State - Business Services Division

FILED

FEB 16 2022

BY

Annual Report for the year: 2022  
Corporation

- Filing period: February 1 - May 1  
 → Filing Fee: \$50.00  
 → Penalty: Additional \$25.00 fee if form is not filed by May 31.

1. Entity ID Number 001682468		2. Exact name of the Corporation Timberline Property Group, Inc.			
3. Principal Office Address 100 Exchange Street - Unit #403			City Providence	State RI	Zip 02903
4. NAICS Code 531110		6. Brief description of the character of business conducted in Rhode Island Real estate holding			
5. State of Incorporation Rhode Island					
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name Raymond Leung			Vice-President Name Mihir Shah		
Street Address 2 Williams Street			Street Address 2 Williams Street		
City Providence	State RI	Zip 02903	City Providence	State RI	Zip 02903
Secretary Name Raymond Leung			Treasurer Name Mihir Shah		
Street Address 2 Williams Street			Street Address 2 Williams Street		
City Providence	State RI	Zip 02903	City Providence	State RI	Zip 02903
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name N/A			Director Name N/A		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name N/A			Director Name N/A		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized		10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
This information is currently of record in the Department of State.  Changes require an additional filing.		NUMBER OF SHARES		CLASS/SERIES	PAR VALUE
		800	CNP	\$0.00	
11. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the 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.					
Name of Authorized Representative Raymond Leung				Date 2/11/2022	
Signature of Authorized Representative					

MAIL TO:  
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