



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2023
Corporation

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

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1. Entity ID Number 272060		2. Exact name of the Corporation Margaret Investments, Inc.			
3. Principal Office Address 65 Fox Ridge Drive		City Cranston		State RI	Zip 02921
4. NAICS Code 531110		6. Brief description of the character of business conducted in Rhode Island The purchase, sale and rental of real estate and any other lawful business.			
5. State of Incorporation Rhode Island					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Margaret M. Scaralia		Vice-President Name Albert J. Scaralia			
Street Address 65 Fox Ridge Drive		Street Address 65 Fox Ridge Drive			
City Cranston	State RI	Zip 02921	City Cranston	State RI	Zip 02921
Secretary Name Albert J. Scaralia		Treasurer Name Margaret M. Scaralia			
Street Address 65 Fox Ridge Drive		Street Address 65 Fox Ridge Drive			
City Cranston	State RI	Zip 02921	City Cranston	State RI	Zip 02921
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name None		Director Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
Director Name		Director Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
9. Shares Authorized This information is currently of record in the Department of State. Changes require an additional filing.		10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>			
		NUMBER OF SHARES		CLASS/SERIES	PAR VALUE
		100		Common	No Par Value
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 Margaret M. Scaralia					Date 2/15/23
Signature of Authorized Representative <i>Margaret M. Scaralia</i>					

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

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Website: www.sos.ri.gov

APR 05 2023

BY 8GMHC