



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. 62690		2. Name of Corporation M.K.E. Inc.			
3. Street Address Principal Business Office 147 GRANDVIEW AVE.			City LINCOLN	State RI	Zip 02865
4. Business Phone No. (401) 727-0664		5. State of Incorporation RHODE ISLAND		6. SIC Code 5538	
7. Brief Description of the Character of Business Conducted in Rhode Island PROPERTY RENTAL					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name MICKERICKSON-ESPOSITO			Vice President Name ANDREW E. ESPOSITO		
Street Address 147 GRANDVIEW AVE.			Street Address 147 GRANDVIEW AVE.		
City LINCOLN	State RI	Zip 02865	City LINCOLN	State RI	Zip 02865
Secretary Name ANDREW E. ESPOSITO			Treasurer Name MICKERICKSON-ESPOSITO		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name			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
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1,000 NO PAR VALUE			none		none

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



File Date 3-2-05
Check No. 209
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.

Mick Erickson 2/28/05
Signature of Officer Date
M.K. ERICKSON-ESPOSITO
Print or Type Name of Officer
PRESIDENT
Title of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

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(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 62690		2. Name of Corporation M.K.E. Inc.			
3. Street Address Principal Business Office 147 GRANDVIEW AVE.			City LINCOLN	State RI	Zip 02865
4. Business Phone No. 727-0664		5. State of Incorporation RHODE ISLAND			6. SIC Code 5538
7. Brief Description of the Character of Business Conducted in Rhode Island PROPERTY RENTAL					

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

President Name M.K. ERICKSON-ESPOSITO			Vice President Name ANDREW E. ESPOSITO		
Street Address 147 GRANDVIEW AVE.			Street Address 147 GRANDVIEW AVE.		
City LINCOLN	State RI	Zip 02865	City LINCOLN	State RI	Zip 02865
Secretary Name ANDREW E. ESPOSITO			Treasurer Name M.K. ERICKSON-ESPOSITO		
Street Address			Street Address		
City	State	Zip	City	State	Zip

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

Director Name			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

10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1,000 NO PAR VALUE			none		

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



* 6 2 6 9 0 *

File Date 5/18/04
Check No. 193
By: W.
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.

M.K. Erickson-Esposito 2/29/04
Signature of Officer Date
M.K. ERICKSON-ESPOSITO
Print or Type Name of Officer
PRESIDENT
Title of Officer



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. **62690** 2. Name of Corporation **M.K.E. Inc.**
 3. Street Address Principal Business Office **147 GRANDVIEW AVE.** City **LINCOLN** State **RI** Zip **02865**
 4. Business Phone No. **727-0664** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **5538**

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

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

President Name M.K. ERICKSON-ESPOSITO Street Address 147 GRANDVIEW AVE. City State Zip LINCOLN RI 02865	Vice President Name ANDREW E. ESPOSITO Street Address City State Zip
Secretary Name ANDREW E. ESPOSITO Street Address 1106 GREAT RD. City State Zip LINCOLN RI 02865	Treasurer Name M.K. ERICKSON-ESPOSITO Street Address City State Zip

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

Director Name Street Address City State Zip	Director Name Street Address City State Zip
Director Name Street Address City State Zip	Director Name Street Address City State Zip

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

AUTHORIZED SHARES	Class/Series	Par Value
1,000 NO PAR VALUE		

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

ISSUED SHARES	Class/Series	Par Value
None		

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



File Date: **3.3.03**
 Check No: **186**
 By: **ICP**

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.

M.K. Erickson-Esposito **2/27/13**
 Signature of Officer Date
M.K. ERICKSON-ESPOSITO
 Print or Type Name of Officer
PRESIDENT
 Title of Officer



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. **62690** 2. Name of Corporation **M.K.E. Inc.**
3. Street Address Principal Business Office **147 GRANDVIEW AVE.** City **LINCOLN** State **RI** Zip **02865**
4. Business Phone No. **727-0664** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **5538**

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

PROPERTY RENTAL

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

President Name **M.K. ERICKSON - ESPOSITO**
Street Address **147 GRANDVIEW AVE.**
City **LINCOLN** State **RI** Zip **02865**

Vice President Name **ANDREW E. ESPOSITO**
Street Address
City State Zip

Secretary Name **ANDREW E. ESPOSITO**
Street Address **6 POWER RD**
City **PAWUCKET** State **RI** Zip **02860**

Treasurer Name **M.K. ERICKSON - ESPOSITO**
Street Address
City State Zip

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

Director Name **NONE**
Street Address
City State Zip

Director Name
Street Address
City State Zip

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 Class/Series Par Value
1,000 NO PAR VALUE

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

ISSUED SHARES
Number of Shares Class/Series Par Value
none

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



* 6 2 6 9 0 *

File Date: **3-4-02**
Check No.: **255**
By: **[Signature]**

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 **[Signature]** Date **3/1/2**
Print or Type Name of Officer **M.K. ERICKSON - ESPOSITO**
Title of Officer **PRES.**



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. **62690** 2. Name of Corporation **M.K.E. Inc.**

3. Street Address Principal Business Office
147 GRANDVIEW AVE. City **LINCOLN** State **RI** Zip **02865**

4. Business Phone No. **727 0664** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **5538**

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

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

<p>President Name MK ERICKSON-ESPOSITO</p> <p>Street Address 147 GRANDVIEW AVE.</p> <p>City State Zip</p>	<p>Vice President Name ANDREW E. ESPOSITO</p> <p>Street Address 6 Power Rd</p> <p>City State Zip PAWTAUCKET RI 02860</p>
<p>Secretary Name ANDREW E ESPOSITO</p> <p>Street Address ABOVE</p> <p>City State Zip</p>	<p>Treasurer Name MK. ERICKSON ESPOSITO</p> <p>Street Address ABOVE</p> <p>City State Zip</p>

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

<p>Director Name NONE</p> <p>Street Address</p> <p>City State Zip</p>	<p>Director Name</p> <p>Street Address</p> <p>City State Zip</p>
<p>Director Name</p> <p>Street Address</p> <p>City State Zip</p>	<p>Director Name</p> <p>Street Address</p> <p>City State Zip</p>

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

AUTHORIZED SHARES	Number of Shares	Class/Series	Par Value
	1,000 SHS NO PAR VAL		

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

ISSUED SHARES	Number of Shares	Class/Series	Par Value
	<i>none</i>		

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



* 6 2 6 9 0 *

File Date: 3/2

Check No.: 173

By: [Signature]

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] 2/26/01
Signature of Officer Date

MK ERICKSON-ESPOSITO
Print or Type Name of Officer

Pres.
Title of Officer



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. 62690	2. Name of Corporation M.K.E. Inc.	City LINCOLN	State RI	Zip 02865
3. Street Address Principal Business Office 147 GRANDVIEW AVE.				
4. Business Phone No. 727 0664	5. State of Incorporation RHODE ISLAND	6. SIC Code 5538		

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

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS				
President Name M.K. ERICKSON-ESPOSITO		Vice President Name ANDREW E. ESPOSITO		
Street Address 147 GRANDVIEW AVE.		Street Address		
City LINCOLN	State RI	Zip 02865		
Secretary Name ANDREW E. ESPOSITO		Treasurer Name M.K. ERICKSON-ESPOSITO		
Street Address 6 POWER RD.		Street Address		
City PAWT.	State RI	Zip 02860		

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS				
Director Name NONE		Director Name		
Street Address		Street Address		
City	State	Zip		
Director Name		Director Name		
Street Address		Street Address		
City	State	Zip		

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>			11. SHARES ISSUED (*X* BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1,000 SHS NO PAR VAL					

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



File Date: **3/1/00**
Check No.: **104**
By: **JCV**

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.

M.K. Erickson-Esposito 2/29/00
Signature of Officer Date
M.K. ERICKSON-ESPOSITO
Print or Type Name of Officer
President
Title of Officer

FOR SECRETARY OF STATE USE ONLY



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1999

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 62690		2. Name of Corporation M.K.E. Inc.	
3. Street Address Principal Business Office 147 GRANDVIEW Ave		City LINCOLN	State RI
		Zip 02865	
4. Business Phone No. 427-0664	5. State of Incorporation RHODE ISLAND		6. SIC Code 5538
7. Brief Description of the Character of Business Conducted in Rhode Island Property Rental			

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name MICHAEL ERICKSON - ESPOSTOL			Vice President Name ANDREW E. ESPOSTOL		
Street Address 147 GRANDVIEW Ave			Street Address 6 Power Rd.		
City LINCOLN	State RI	Zip 02865	City PAWBUCKET	State RI	Zip 02860
Secretary Name ANDREW E. ESPOSTOL			Treasurer Name MICHAEL ERICKSON - ESPOSTOL		
Street Address ABOVE			Street Address ABOVE		
City	State	Zip	City	State	Zip

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
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

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT) <input type="checkbox"/>			11. SHARES ISSUED (*X* BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1,000 SHS NO PAR VAL			NONE		

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



File Date: **March 1999**

Check No.: **200**

By: **[Signature]**

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.

Michael Erickson - Esposito 3/1/99
Signature of Officer Date

MICHAEL ERICKSON - ESPOSTOL
Print or Type Name of Officer

PRESIDENT
Title of Officer

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1998

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



(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 62890		2. Name of Corporation M.K.E. Inc.			
3. Street Address Principal Business Office 147 GRANDVIEW AVE			City LINCOLN	State RI	Zip 02865
4. Business Phone No. 727-0664		5. State of Incorporation RHODE ISLAND			6. SIC Code 5538
7. Brief Description of the Character of Business Conducted in Rhode Island RENTAL OF COMMERCIAL AND RESIDENTIAL PROPERTIES					
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT)					
President Name M.K. ERICKSON-ESPOSITO			Vice President Name ANDREW E. Esposito		
Street Address 147 GRANDVIEW AVE			Street Address 6 POWER Rd.		
City LINCOLN	State RI	Zip 02865	City PAWSETT	State RI	Zip 02860
Secretary Name ANDREW E. ESPOSITO			Treasurer Name M.K. ERICKSON-ESPOSITO		
Street Address (SEE V.P.)			Street Address (SEE PRES)		
City	State	Zip	City	State	Zip
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT)					
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
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)			11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1,000 SHS NO PAR VAL			NONE		NONE

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



* 6 2 6 9 0 *

File Date: **3/3/98**

Check No.: **152**

By: *[Signature]*

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.

M.K. Erickson-Esposito 2/28/98
Signature of Officer Date

M.K. ERICKSON-ESPOSITO
Print or Type Name of Officer

PRES.
Title of Officer



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. 62690		2. Name of Corporation M.K.E. Inc.			
3. Street Address Principal Business Office 147 GRANDVIEW AVE			City LINCOLN	State RI	Zip 02865
4. Business Phone No. 727-0664		5. State of Incorporation RHODE ISLAND			6. SIC Code 6638
7. Brief Description of the Character of Business Conducted in Rhode Island Rental of commercial and residential PROPERTIES					
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name M.K. ERICKSON-ESPOSITO			Vice President Name ANDREW E. ESPOSITO		
Street Address 147 GRANDVIEW AVE.			Street Address 6 Power Rd		
City LINCOLN	State RI	Zip 02865	City PAWT.	State RI	Zip 02860
Secretary Name ANDREW E. ESPOSITO			Treasurer Name M.K. ERICKSON-ESPOSITO		
Street Address 6 Power Rd.			Street Address 147 GRANDVIEW AVE.		
City PAWT.	State RI	Zip 02860	City LINCOLN	State RI	Zip 02865
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name			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
10. SHARES AUTHORIZED AND ISSUED (*X* BOX FOR ATTACHMENT) <input type="checkbox"/>					
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1,000 SHS NO PAR VAL			NONE		NONE

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



File Date: **2-28-97**
Check No.: **1716**
By: **UP/SEC**

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: **M.K. Erickson Esposito** Date: **2/22/97**
Print or Type Name of Officer: **M.K. ERICKSON-ESPOSITO**
Title of Officer: **PRES.**

**PROFIT CORPORATION
ANNUAL REPORT**

1996



STATE OF RHODE ISLAND AND PROVIDENCE FINANCIALS
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

PLEASE TYPE OR PRINT IN BLACK INK.

1. CORPORATE ID NO. 62690		2. NAME OF CORPORATION M.K.E. Inc.	
3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE 147 Grandview Ave.		CITY Lincoln	STATE RI
4. BUSINESS PHONE NO. 727-0664		5. STATE OF INCORPORATION RHODE ISLAND	6. SIC CODE 5538

7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND
Rental of commercial and residential properties

8. NAMES AND ADDRESSES OF THE OFFICERS

PRESIDENT NAME M.K. Erickson-Esposito			VICE PRESIDENT NAME Andrew E. Esposito		
STREET ADDRESS 147 Grandview Ave.			STREET ADDRESS 6 Power Rd.		
CITY Lincoln	STATE RI	ZIP CODE 02865	CITY Pawtucket	STATE RI	ZIP CODE 02860
SECRETARY NAME Andrew E. Esposito			TREASURER NAME M.K. Erickson-Esposito		
STREET ADDRESS 6 Power Rd.			STREET ADDRESS 147 Grandview Ave.		
CITY Pawtucket	STATE RI	ZIP CODE 02860	CITY Lincoln	STATE RI	ZIP CODE 02865

9. NAMES AND ADDRESSES OF THE DIRECTORS

DIRECTOR NAME none			DIRECTOR NAME		
STREET ADDRESS			STREET ADDRESS		
CITY	STATE	ZIP CODE	CITY	STATE	ZIP CODE
DIRECTOR NAME			DIRECTOR NAME		
STREET ADDRESS			STREET ADDRESS		
CITY	STATE	ZIP CODE	CITY	STATE	ZIP CODE

10. SHARES AUTHORIZED AND ISSUED

AUTHORIZED SHARES			ISSUED SHARES		
NUMBER OF SHARES	CLASS / SERIES	PAR VALUE	NUMBER OF SHARES	CLASS / SERIES	PAR VALUE
1,000 SHS	NO PAR VAL		none		

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.

File Date: 2/27/96
Check No: 134
By: CP
For Secretary of State Use Only

M.K. Erickson-Esposito
Signature of Officer
M.K. ERICKSON-ESPOSITO
Print or Type Name of Officer
President
Title of Officer
2/24/96
Date

DETACH BOTTOM BEFORE RETURNING



ALL ENTRIES MUST BE COMPLETED IN FULL OR THE FORM WILL BE RETURNED.

Corporate ID: **0052690**

Annual Report for the year: **1995**

Name of Corporation: **M.K.E. INC.**

Business entity organized under the laws of the State of: **RI.**
 For foreign entity, address and telephone number of principal office:

Business Entity is (check one):
 Business Corporation (See RIGL Chapter 7-1.1)
 Professional Service Corporation (See RIGL Chapter 7-5.1)

Phone: ()
 Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):

Brief statement of the character of business conducted in Rhode Island:
Rental of common commercial and residential properties and sale of similar type properties

*147 GRANDVIEW AVE.
 LINCOLN RI 02865*

Phone: *(401) 727-0664*

THE NAMES OF THE OFFICERS ARE:

PRESIDENT	STREET ADDRESS	CITY/STATE	ZIP CODE
<i>M.K. ERICKSON - ESPOSITO</i>	<i>147 GRANDVIEW AVE.</i>	<i>Lincoln RI</i>	<i>02865</i>
VICE PRESIDENT	STREET ADDRESS	CITY/STATE	ZIP CODE
<i>ANDREW E. ESPOSITO</i>	<i>6 POWER Rd.</i>	<i>Pawtucket RI</i>	<i>02860</i>
SECRETARY	STREET ADDRESS	CITY/STATE	ZIP CODE
<i>"</i>	<i>"</i>	<i>"</i>	<i>"</i>
TREASURER	STREET ADDRESS	CITY/STATE	ZIP CODE
<i>MIK ERICKSON - ESPOSITO</i>	<i>AS ABOVE</i>		

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
<i>AS ABOVE</i>			
NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
NAME	STREET ADDRESS	CITY/STATE	ZIP CODE

NUMBER OF SHARES AUTHORIZED (Rider may be attached)		NUMBER OF SHARES ISSUED AND OUTSTANDING (Rider may be attached)	
Number of Shares	Class / Series	Number of Shares	Class / Series
<i>1000</i>	<i>Common no par</i>	<i>1000</i>	<i>Common no par</i>

Date: *February 28, 1995*

By: *M.K. Erickson - Esposito*
 PRINT OR TYPE NAME OF OFFICER SIGNING: *M.K. ERICKSON - ESPOSITO*
 TITLE OF OFFICER SIGNING: *President*

Form 31 1/95

DESIGNATED REGISTERED AGENT FOR SERVICE OF PROCESS:

PLEASE NOTE: If the registered office and/or registered agent indicated below is incorrect, Form 9 must be filed.

**M.K. ERICKSON-ESPOSITO
 147 GRANDVIEW AVENUE
 LINCOLN RI 02865**

FILED
MAR 02 1995
 By *CC #123*

State of Rhode Island and Providence Plantations
CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, R.I. 02903

Corporate ID...0062690 Annual Report for the year...1994
First: The name of the corporation is...M.K.E., Inc.
Second: It is incorporated under the laws of...RHODE ISLAND
Third: Character of business, briefly stated, is...RENTAL OF,
COMMERCIAL AND RESIDENTIAL PROPERTIES AND SALE OF SIMILAR TYPE
PROPERTIES
Fourth: If foreign...
Fifth: Business address in R.I....147 Grandview Ave.. Lincoln,
02865
Sixth: Names and addresses of directors and officers:

M.K. Erickson-Esposito...President...147 Grandview Ave. Lincoln,
RI 02865
Andrew E. Esposito.Vice President.6 Power Rd. Pawtucket, RI 02860.
Andrew E. Esposito.Secretary...6 Power Rd. Pawtucket, RI 02860
M.K. Erickson-Esposito.....Treasurer..147 Grandview Ave. Lincoln,
RI 02865

Seventh: Number of Shares authorized: Par Value
or statement that
shares are without
par value
NO PAR

No. of Shares	Class	Series
1000	COMMON	

Eighth: Number of Shares issued: Par Value
or statement that
shares are without
par value
NO PAR

No. of Shares	Class	Series
200	COMMON	

Dated...March 1, 1994 M.K.E. Inc.
By .....
Title...Secretary

FILED

MAR 8 1994

By RP/CE 109

CALL AND WAIVER OF NOTICE OF THE ANNUAL MEETING OF
THE SHAREHOLDERS OF M.K.E., INC.

(SITTING WITH THE FULL POWERS OF A BOARD OF DIRECTORS AS A
CLOSE CORPORATION PURSUANT TO SECTION 7-1.1-51 OF THE GENERAL
LAW OF 1956, AS AMENDED)

We the undersigned, being the stockholders of M.K.E.

call the 1994 Annual meeting of the Shareholders (sitting with the full powers of
a Board of Directors according to Section 7-1.1-51 of the General Law of 1956,
as amended), to be held at 4 Power Rd, Pawtucket, R.I., 02860 on Monday
February 15, 1994 at 7:00 p.m. for the following purposes:

- A. To elect the officers of the Corporation who will serve during the year 1994
- B. Any other business brought up for discussion at the meeting.

Further, more we hereby waive all statutory and By-Law requirements as to
notice of time, place, and purpose of said meeting, and we specifically consent
to such meeting.

Dated at Pawtucket this 15th day of February, 1994.


M.K. Erickson-Esposito, President

MINUTES OF THE ANNUAL MEETING OF THE SHAREHOLDERS OF M.K.E.,
INC.

Held February 15, 1994

(SITTING WITH THE FULL POWERS OF A BOARD OF DIRECTORS AS A
CLOSE CORPORATION PURSUANT TO SECTION 7-1.1-51 OF THE GENERAL
LAW OF 1956, AS AMENDED)

The Annual Meeting of the Shareholders of M.K.E., Inc. sitting with the full powers of a Board of Directors as a close corporation pursuant to Section 7-1.1-51 of the General Laws 1956, as amended, was held at 4 Power Rd. Pawtucket, R.I. 02865 on February 15, 1994, pursuant to the foregoing Call and Waiver of Notice signed by the stockholders of record.

The President of the Corporaton, M.K. Erickson-Esposito called the meeting to order at 8:00 p.m. and requested that Andrew Esposito, Secretary, call the roll of Shareholders and keep the Minutes of the Meeting. Upon roll call, all of the Shareholders were found to be present.

The stockholders of record, thereupon elected to office the following:

PRESIDENT	-----	M.K. ERICKSON-ESPOSITO
VICE PRESIDENT	-----	ANDREW ESPOSITO
SECRETARY	-----	ANDREW ESPOSITO
TREASURER	-----	M.K. ERICKSON-ESPOSITO

There being no further business to come before the Meeting , the Meeting was adjourned at 8:45 p.m.

Respectfully submitted,

Andrew Esposito, Secretary





State of Rhode Island and Providence Plantations
Barbara M. Leonard
Secretary of State
100 North Main Street
Providence, Rhode Island
02903-1335

SUPPLEMENT TO 1994 ANNUAL REPORT

Corporation Name: M.K.E., Inc.

Federal Taxpayer Identification Number: [REDACTED]

For foreign entity, address and telephone number of principal office:

Phone () _____

Address and telephone number of the principal office of business entity in Rhode Island (Provide street address-not P.O. Box):

147 GRANDVIEW AVE.
LINCOLN RI 02865

Phone (401) 727-0664

Business entity is (check one):

- () Business Corporation (See RIGL Chapter 7-1.1)
() Professional Service Corporation (See RIGL Chapter 7-5.1)
() Limited Liability company (See RIGL 7-16)

Name, title and mailing address of contact person to whom communications may be directed:

M.K. ERICKSON - ESPOSITO, PRES.
147 GRANDVIEW AVE
LINCOLN RI 02865

Date of organization: 12/91 12/12/90 (PLP)

Date of qualification to do business in Rhode Island (if foreign entity): 12/91

1090 7B

State of Rhode Island and Providence Plantations
CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, R.I. 02903

Corporate ID...0062690 Annual Report for the year...1993

- First: The name of the corporation is..M.K.E., Inc.
- Second: It is incorporated under the laws of...RHODE ISLAND
- Third: Character of business, briefly stated, is..RENTAL OF COMMERCIAL AND RESIDENTIAL PROPERTIES AND SALE OF SIMILAR TYPE PROPERTIES
- Fourth: If foreign...
- Fifth: Business address in R.I....147 GRANDVIEW AVE. LINCOLN, R.I.02865
- Sixth: Names and addresses of directors and officers:

M.K. ERICKSON-ESPOSITO...President..147 GRANDVIEW AVE. LINCOLN, R.I. 02865

ANDREW B.ESPOSITO...Vice President..6 POWER RD. PAWTUCKET, R.I. 02860

ANDREW B. ESPOSITO...Secretary..6 POWER RD. PAWTUCKET, R.I.02860

M.K. ERICKSON-ESPOSITO...Treasurer..147 GRANDVIEW AVE. LINCOLN, R.I. 02865

Seventh: Number of Shares authorized:

No. of Shares	Class	Series	Par Value
1000	COMMON		or statement that shares are without par value
			NO PAR

Eighth: Number of Shares issued:

No. of Shares	Class	Series	Par Value
200	COMMON		or statement that shares are without par value
			NO PAR

Dated...March 1. 1993 M.K.E. Inc.

M.K. Guisher Esposito
Title...President

PAID
MAR 03 1993

SECRETARY OF STATE

**MINUTES OF THE ANNUAL MEETING OF THE SHAREHOLDERS OF M.K.E.,
INC.**

Held February 15, 1993
(SITTING WITH THE FULL POWERS OF A BOARD OF DIRECTORS AS A
CLOSE CORPORATION PURSUANT TO SECTION 7-1.1-51 OF THE GENERAL
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The Annual Meeting of the Shareholders of M.K.E., Inc. sitting with the full powers of a Board of Directors as a close corporation pursuant to Section 7-1.1-51 of the General Laws 1956, as amended, was held at 4 Power Rd. Pawtucket, R.I. 02865 on February 15, 1993, pursuant to the foregoing Call and Waiver of Notice signed by the stockholders of record.

The President of the Corporation, M.K. Erickson-Esposito called the meeting to order at 8:00 p.m. and requested that Andrew Esposito, Secretary, call the roll of Shareholders and keep the Minutes of the Meeting. Upon roll call, all of the Shareholders were found to be present.

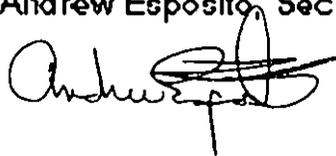
The stockholders of record, thereupon elected to office the following:

PRESIDENT	-----	M.K. ERICKSON-ESPOSITO
VICE PRESIDENT	-----	ANDREW ESPOSITO
SECRETARY	-----	ANDREW ESPOSITO
TREASURER	-----	M.K. ERICKSON-ESPOSITO

There being no further business to come before the Meeting, the Meeting was adjourned at 8:45 p.m.

Respectfully submitted,

Andrew Esposito, Secretary



CALL AND WAIVER OF NOTICE OF THE ANNUAL MEETING OF
THE SHAREHOLDERS OF M.K.E., INC.

(SITTING WITH THE FULL POWERS OF A BOARD OF DIRECTORS AS A
CLOSE CORPORATION PURSUANT TO SECTION 7-1.1-51 OF THE GENERAL
LAW OF 1956, AS AMENDED)

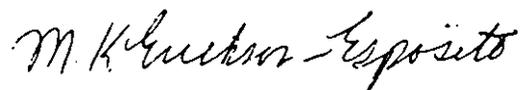
We the undersigned, being the stockholders of M.K.E., Inc.
call the 1993 Annual meeting of the Shareholders (sitting with the full powers of
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as amended), to be held at 4 Power Rd, Pawtucket, R.I., 02860 on Monday
February 15, 1993 at 8:00 p.m. for the following purposes:

- A. To elect the officers of the Corporation who will serve during the year 1993
- B. Any other business brought up for discussion at the meeting.

Further, more we hereby waive all statutory and By-Law requirements as to
notice of time, place, and purpose of said meeting, and we specifically consent
to such meeting.

Dated at Pawtucket this 15th day of February, 1993.

M.K.Erickson-Esposito, President



Filing Fee \$50.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

SM # 1079

Corporate ID 0062690 Annual Report for the year 1992

FIRST: The name of the corporation is M.K.E., Inc.

SECOND: It is incorporated under the laws of RHODE ISLAND

THIRD: Character of business, briefly stated, is RENTAL OF COMMERCIAL AND RESIDENTIAL PROPERTIES AND SALE OF SIMILAR TYPE PROPERTIES

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 147 GRANDVIEW AVENUE, LINCOLN, RI 02865

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
..	Director	
..	Director	
..	Director	
MARILYN K. ERICKSON-ESPOSITO	President	147 GRANDVIEW AVE. LINCOLN, R.I. 02865
ANDREW E. ESPOSITO	Vice President	6 POWER RD. PAWTUCKET, R.I. 02860
ANDREW E. ESPOSITO	Secretary	6 POWER RD. PAWTUCKET, R.I. 02860
MARILYN K. ERICKSON-ESPOSITO	Treasurer	147 GRANDVIEW AVE., LINCOLN, R.I. 02865

SEVENTH: Number of Shares authorized:

No. of Shares	Class
1000	COMMON

PAID
FEB 27 1992
SECY OF STATE

Par Value
or statement that
shares are without
par value
NO PAR

EIGHTH: Number of Shares issued:

No. of Shares	Class
200	COMMON

Par Value
or statement that
shares are without
par value
NO PAR

Dated JANUARY 24 1992

M.K.E., INC.
(Name of Corporation)

By Marilyn Erickson Esposito

Title PRESIDENT

(Report must be signed by an officer)

Filing Fee \$50.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0062690 Annual Report for the year 1991

HC

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Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
MARILYN K. ERICKSON_ESPOSITO	President	147 GRANDVIEW AVENUE, LINCOLN, RI 02865
ANDREW E. ESPOSITO	Vice President	3 COTTAGE STREET, LINCOLN, RI 02865
ANDREW E. ESPOSITO	Secretary	3 COTTAGE STREET, LINCOLN, RI 02865
MARILYN K. ERICKSON_ESPOSITO	Treasurer	147 GRANDVIEW AVENUE, LINCOLN, RI 02865

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
1000	COMMON		NO PAR

PAID
FEB 14 1991
SECY OF STATE

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
200	COMMON		NO PAR

Dated JANUARY 8 19 91

M. K. E. INC.
(Name of Corporation)

By M.K. Erickson - Esposito

Title PRESIDENT

(Report must be signed by an officer)