

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street Providence, RI 02904-2615 401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2013

Filing Period: January 1 - March 1 • Filing Fee: \$50.00* • THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK. * In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is

subject to a penalty fee of \$25.00. 1. Corporate ID No. 2. Name of Corporation
COSTANTINO BROS. REALTY CO. 4903 3. Street Address Principal Business Office *City* Johnston State ZiD 1674 Hartford Ávenue RI 02919 4. Business Phone No 5. State of Incorporation 401-831-5590 Rhode Island 6. Brief Description of the Character of Business Conducted in Rhode Island Realty Company 7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) \Box FILL IN SPACES BEFORE USING ATTACHMENTS President Name Vice President Name Sheryl A. Costantino Street Address Street Address 1674 Hartford Avenue City State Ζiρ **Johnston** RI 02919 Treasurer Name Secretary Nam Sheryl A. Costantino Sheryl A. Costantino Street Address Street Address 1674 Hartford Avenue 1674 Hartford Avenue City Johnston **02919** RI Johnston RI 02919 8. 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 Ζip City State Zin Director Name Director Name Street Address Street Address City State Zip City State ZiD9. SHARES AUTHORIZED 10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ISSUED SHARES --- THIS SECTION MUST BE COMPLETED Number of Shares Par Value This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of 50 Class A Common No Par instruction sheet. THIS F 4950 Class B Common No Par 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.

	FILED	Under penalty of perjury, I declare and affirm th including any accompanying schedules and stat	
File Date	FEB 1 4 2013	contained herein are true and correct.	2/7/13
Check No.	573/	Signature / / Shery A. Costantino	Date
By: FOR SECRETARY OF STATE USE ONLY		Print or Type Name President Title	