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Annual Report for the year: __ 2017

FOR SECRETARY OF STATE USE ONLY

Limited Liability Company

- → Filing period. September 1 November 1
- → Filing Fee: \$50.00
- → Penalty: Additional \$25.00 fee if form is not filed by December 1.

1, Entity ID Number	2. Exact name of the Limited Liability Company						
136172	PASTRY LAND REALTY, LLC						
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island						
53110	to own and manage real estate						
5. State of Formation Rhode Island							
6. Principal Office Address			City		State	Zip	
19 Sanderson Road			Smithfie	ld	RI	02917-0000	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person							
Contact Name Carlo Conti			Contact Title Member				
Street Address 19 Sanderson Road			City Smithfie	eld	State RI	Zip 02917-0000	
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS							
Manager Name N/A			Manager Name				
Street Address			Street Address				
City	State	Zip	City		State	Zip	
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zip	City		State	Zip	
Check the box to indicate an attachment							
9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 642.							
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 Person			Date				
Carlo Conti				Member		09/01/2017	
Signature of Authorized Person SIGN DOCUMENT HERE							

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov FILED SEP 1 8 2017 62

FORM 632 - Revised: 02/2017