State of Rhode Island and Providence Plantations Office of the Secretary of State         Division Of Business Services 148 W. River Street Providence RI 02904-2615 (401) 222-3040         Limited Liability Company Annual Report         Filing Period. September 1 - November 1         In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to lie its annual report within thirty (30) days after the time presented by law (R.I.G.L. 7- 16-66(Red)) (8 subject to a penaty fee of 825.00.         ANNUAL REPORT YEAR: 2017         1. ID No. 000122985         2. Exact Name of the Limited Liability Company ANTHONY STREET, LLC         3. State of Formation State: RI         ARTICLE III         Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes here. More information on NAICS can be found online. S31390         A State of Formation State: RI         ARTICLE III         Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes here. More information on NAICS can be found online. S31390         A Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island         REAL ESTATE HOLDING COMPANY         S Principal Office Address         No. and Street:					
148 W. River Street Providence RI 02904-2615 (401) 222-3040         Limited Liability Company Annual Report         Filing Period: September 1 - November 1         Integrating Period: September 1 - November 2017         Integrating Period: September 1 - November 2017         Integrating Period: Novemany ANTHONY STREET; LLC <t< td=""><td>s s</td><td></td><td></td><td>Fee: \$50.00</td></t<>	s s			Fee: \$50.00	
Annual Report         Filing Period. September 1 - November 1         In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thity (20) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.         ANNUAL REPORT YEAR: 2017         1. ID No.       000122985         2. Exact Name of the Limited Liability Company ANTHONY STREET, LLC         3. State of Formation         State: RI         ARTICLE III         Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes here. More information on NAICS can be found online.         531390         4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island         REAL ESTATE HOLDING COMPANY         5. Principal Office Address         No: and Street:       21 WEST 9TH STREET #4         City or Town:       NEW YORK       State: NY       Zip: 10011       Country: USA         6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:         Contact Name: JOHN LIPORACE Contact Title: OWNER         No: and Street:       21 WEST 9TH STREET #4       City or Town:       NEW YORK       State: NY       Zip: 10011       Country: USA       6. Mailling Addr	HOPE	148 W. River S Providence RI 029	Street 004-2615		
to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7- 16-66(b&c)) is subject to a penalty fee of \$25.00.  ANNUAL REPORT YEAR: 2017  1. ID No. 000122985  2. Exact Name of the Limited Liability Company ANTHONY STREET, LLC  3. State of Formation State: R  ARTICLE II  Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes here, More information on NAICS can be found online. 531390  4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island REAL ESTATE HOLDING COMPANY  5. Principal Office Address No. and Street: 21 WEST 9TH STREET #4 City or Town: NEW YORK State: NY zip: 10011 Country: USA  6. Mailing Address of Limited Liability Company and Name or Title of Contact Person: Contact Name: JOHN LIPORAGE Contact Title: OWNER No. and Street: 21 WEST 9TH STREET #4 City or Town: NEW YORK State: NY zip: 10011 Country: USA  7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS  Automation  Contact Name Piret, Modele, Last, Suffix Address, City or Town, State, Zip Code, Country	Annual Report				
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2. Exact Name of the Limited Liability Company ANTHONY STREET, LLC         3. State of Formation         State: RI         ARTICLE III         Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes here, More information on NAICS can be found online.         531390         4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island         REAL ESTATE HOLDING COMPANY         5. Principal Office Address         No. and Street:       21 WEST 9TH STREET #4         City or Town:       NEW YORK       State: NY       Zip: 10011       Country: USA         6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:         Contact Name: JOHN LIPORACE Contact Title: OWNER         No. and Street:       21 WEST 9TH STREET #4       City or Town: NEW YORK       State: NY       Zip: 10011       Country: USA         6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:         Contact Name: JOHN LIPORACE Contact Title: OWNER         No. and Street:       21 WEST 9TH STREET #4       City or Town: NEW YORK       State: NY       Zip: 10011       Country: USA         7 Name and Address of Each Manager of the Limited Liability Company, if Applicable.	ANNUAL REPORT YEAR: 2017				
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ARTICLE III         ARTICLE III         Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes here. More information on NAICS can be found online.         S13390         4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island         REAL ESTATE HOLDING COMPANY         5. Principal Office Address         No. and Street:       21 WEST 9TH STREET #4         City or Town:       NEW YORK       State: NY       Zip: 10011       Country: USA         6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:         Contact Name:         JOHN LIPORACE Contact Title:       OWNER         No. and Street:       21 WEST 9TH STREET #4         City or Town:       NEW YORK       State: NY       Zip: 10011       Country: USA         6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:         Contact Name:       JOHN LIPORACE Contact Title:       OWNER         No. and Street:       21 WEST 9TH STREET #4       City or Town:       NEW YORK         City or Town:       NEW YORK       State: NY       Zip: 10011       Country: USA         Contact Name:	2. Exact Name of the Limited Liability Company <u>ANTHONY STREET, LLC</u>				
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5. Principal Office Address         No. and Street:       21 WEST 9TH STREET #4 City or Town:         NEW YORK       State: NY       Zip: 10011       Country: USA         6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:         Contact Name:       JOHN LIPORACE Contact Title:       OWNER         No. and Street:       21 WEST 9TH STREET #4 City or Town:       Country: USA         No. and Street:       21 WEST 9TH STREET #4 City or Town:       NEW YORK       State: NY       Zip: 10011       Country: USA         7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS       Individual Name First, Middle, Last, Suffix       Address	4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island				
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First, Middle, Last, Suffix Address, City or Town, State, Zip Code, Country					
	Title			Code, Country	
A DE LE CHERTER E MARINE EN E					

Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

FRANK DOYLE ONE HAZARD STREET NEWPORT, RI 02840

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

**Signed this 11 Day of October, 2017 at 10:39:32 AM by the authorized person.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.* 

By <u>RICHARD J. LYNNE</u>

Signature of Authorized Person

Form No. 632 Revised 09/07

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