

STAMP

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				
0099770	A.M.A. REALTY, LLC				
3. NAICS Code 50110	Brief description of the character of business conducted in Rhode Island ownership and development of real estate and any other lawful purpose				
5. State of Formation Rhode Island					
6. Pnncipal Office Address			City	State	Zıp
3348 Pawtucket Avenue			East Providence	RI	02915-0000
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Joseph F. Martins Revocable Trust Agreement dated			Contact Title Member		
Street Address 7/15/1998 3348 Pawtucket Avenue			City East Providence	State RI	Zip 02915-0000
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	Zıp	City	State	Zıp
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 Joseph F. Martins, Joseph F. Martins Revocab	Trustee of de Trust Agree	the ment dated Jul	y 15, 1998,. Member	Date 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

