



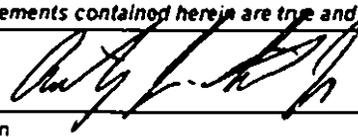
State of Rhode Island and Providence Plantations
Department of State - Business Services Division

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FOR
 SECRETARY OF STATE
 USE ONLY

Annual Report for the year: 2017
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 522121		2. Exact name of the Limited Liability Company Silvestri Leasing Company, LLC			
3. NAICS Code 53110		4. Brief description of the character of business conducted in Rhode Island Real Estate Ownership			
5. State of Formation RHODE ISLAND					
6. Principal Office Address 51 Worthington Road			City Cranston	State RI	Zip 02920
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Anthony J. Silvestri, Jr.			Contact Title President		
Street Address P.O. Box 8062			City Cranston	State RI	Zip 02920
8. List ALL managers (names and addresses) of the Limited Liability Company. IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name None		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 <input type="checkbox"/>					
9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 642.					
<i>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.</i>					
Name of Authorized Person Anthony J. Silvestri, Jr.				Date 10/12/17	
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.n.gov

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 OCT 16 2017
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 FORM 632 - Revised: 02/2017