



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: 2018

Corporation

→ Filing period: January 1 - March 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by April 1.

1. Entity ID Number 600002230		2. Exact name of the Corporation Bellevue Realestators Inc	
3. Principal Office Address 63 Bellevue Avenue		City Newport	State RI
		Zip 02840	
4. NAICS Code 531110	6. Brief description of the character of business conducted in Rhode Island Real Estate Development, Brokerage and other Related Services and Rental & Leasing		
5. State of Incorporation Rhode Island			
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
President Name Vincent A. Marcelllo		Vice-President Name	
Street Address 179 Fustis Avenue		Street Address	
City Newport	State RI	Zip 02840	
Secretary Name		Treasurer Name	
Street Address		Street Address	
City	State	Zip	
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
Director Name		Director Name	
Street Address		Street Address	
City	State	Zip	
Director Name		Director Name	
Street Address		Street Address	
City	State	Zip	
9. Shares Authorized This information is currently of record in the Department of State. Changes require an additional filing.		10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>	
		NUMBER OF SHARES 100	CLASS/SERIES No Par
11. 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. 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 Representative Vincent A. Marcelllo		Date 12/29/2017	
Signature of Authorized Representative <i>[Signature]</i>		SIGN DOCUMENT	

FILED

JAN 02 2018

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FORM 630 - Revised: 10/2017