



RI SOS Filing Number: 201875159930 Date: 8/21/2018 4:00:00 PM

State of Rhode Island and Providence Plantations Office of the Secretary of State

Secretary of State Corporations Division 148 W. River Street Providence, RI 02901-2615 401.222.8600

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2018

Filing Period: September 1 - November 1 • Filing Fee: \$50.00* • THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.

* In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b)(3)) is subject to a penalty fee of \$25.00

Form with fields for: 1. RI No (83766), 2. Exact name of the limited liability company (MASBRO, L.L.C.), 3. State of formation (RI), 4. Brief description of the character of the business (TO ENGAGE IN BUYING, OWNING AND MANAGING REAL ESTATE), 5. Principal office address (5 LORI ELLEN DR., SMITHFIELD, RI, 02917-2313), 6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON (THOMAS MASSO, PRES.), 7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE (THOMAS MASSO, SMITHFIELD, RI, 02917-2313), 8. RESIDENT AGENT IN RHODE ISLAND

FILED AUG 21 2018 BY 1835

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

FOR SECRETARY OF STATE USE ONLY. Fields for File Date, Check No., and By.

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

Signature of Authorized Person: Thomas Masso, Date: 8-20-18, Print or Type Name of Authorized Person: THOMAS MASSO