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

State of Rhode Island and Providence Plantations  Department of State - Business Services Division	
Annual Report for the year: 2018	
Limited Liability Company	
→ Filing period: September 1 - November 1 → Filing Fee: \$50.00	

1. Entity ID Number 2. Exact name of the Limited Liability Company 000983036 216 Wood Avenue, LLC 3. NAICS Code 4. Brief description of the character of business conducted in Rhode Island 531311 Own and manage real estate 5. State of Formation RI 6. Principal Office Address City State Zip 625 New Jersey Avenue Brooklyn NY 11207 7 Mailing Address of Limited Liability Company and Name or Title of Contact Person Contact Title Member Contact Name Joel K. Alleyne Street Address 625 New Jersey Avenue State NY City Brooklyn Zip 11207 8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS Manager Name Manager Name Street Address Street Address State City Ζıp City State Zip Manager Name Manager Name Street Address Street Address State 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 Joel K. Alleyne SION DOCUMENT HERE

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**Division of Business Services** 

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov **FILED** 

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