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State of Rhode Island and Providence Plantations

Department of State - Business Services Division

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Annual Report for the year: 2016 **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 000134126		2. Exact name of the Limited Liability Company MACARUSO REALTY, LLC				
3. NAICS Code	4. Brief des	4. Brief description of the character of business conducted in Rhode Island				
531120		TO PURCHASE, SELL, LEASE, HOLD, DEVELOP AND OTHERWISE DEAL WITH REAL PROPERTY				
5. State of Formation	BOTH RES	BOTH RESIDENTIAL, COMMERCIAL AND MIXED.				
RHODE ISLAND	}					
6. Principal Office Address			City	State	Zip	
124 BISHOP HILL ROAD			JOHNSTON	RI	02919	
7. Mailing Address of Limite	ed Liability Compa	iny and Name or				
Contact Name AMANDA MACARUSO			Contact Title MEMBER			
Street Address 124 BISHOP HILL ROAD			City JOHNSTON	State RI	^{Zip} 02919	
8. List ALL managers (nam	nes and addresses	s) of the Limited	Liability Company, IF APPLICAE	BLE - DO NOT LIST	MEMBERS	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address	Street Address		
City	State	Zıp	City	State	Zip	
				Check the box to	indicate an attachment	
9. Resident Agent in Rhode	■ Island. This inform	nation is currently	of record with the Department of Sta	ite. Changes require fil	ing Form 642.	
Under penalty of perjury, statements, and that all s	l declare and affi statements conta	irm that I have ined herein are	examined this report, including true and correct.	g any accompanyi	ng schedules and	
Name of Authorized Person				Date /	/	
AMANDA MACARUSO, M	IEMBER			1012	(0/00/9	
Signature of Authorized Rei	27 171	0 NG	NOCHMENTHERI		7	

MAIL TO:

Division of Business Services

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

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