



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

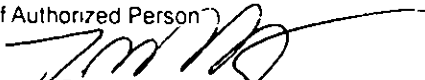
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BUS SVCS DIV

2019 SEP 27 P 3:42
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SECRETARY OF STATE
USE ONLY

Annual Report for the year: **2018**
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 206648		2. Exact name of the Limited Liability Company 1191 MAIN STREET REALTY, LLC			
3. NAICS Code 531311		4. Brief description of the character of business conducted in Rhode Island TO PURCHASE, SELL, MANAGE AND/OR LEASE COMMERCIAL AND RESIDENTIAL PROPERTIES.			
5. State of Formation RHODE ISLAND					
6. Principal Office Address 1191-1195 NORTH MAIN STREET			City PROVIDENCE	State RI	Zip 02904
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name FRANK D'ALESSANDRO, MD			Contact Title PRESIDENT		
Street Address 145 DARBY ROAD			City NORTH SCITUATE	State RI	Zip 02857
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					
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 FRANK D'ALESSANDRO, MD				Date 9-24-19	
Signature of Authorized Person X 				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.ri.gov

FILED

SEP 27 2019

BY **9/28/19 E8**

FORM 632 - Revised: 10/2017