



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

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BY

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[Handwritten Signature]

Annual Report for the year: 2019
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 788352		2. Exact name of the Limited Liability Company AJAK, LLC			
3. NAICS Code 531390		4. Brief description of the character of business conducted in Rhode Island OWN AND MANAGE REAL ESTATE			
5. State of Formation RHODE ISLAND					
6. Principal Office Address 58 EAST MAIN ROAD <i>28 Malee Terrace</i>		City <i>Portsmouth</i> MIDDLETOWN	State RI	Zip <i>02871</i> 02842	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name DR ALESSI RISPOLI			Contact Title MEMBER		
Street Address 58 EAST MAIN ROAD <i>28 Malee Ter.</i>		City <i>MIDDLETOWN</i> <i>Portsmouth</i>	State RI	Zip 02842 <i>02871</i>	
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			
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 current 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 <i>Alessi A. Rispoli</i>				Date <i>10/22/2019</i>	
Signature of Authorized Person <i>[Handwritten Signature]</i>				SIGN DOCUMENT HERE	

MAIL TO:
Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
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Website: www.sos.ri.gov