



State of Rhode Island

## Department of State - Business Services Division

**FILED**

OCT 06 2020

BY

Annual Report for the year: 2020

## 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 135756		2. Exact name of the Limited Liability Company Neal Estate, LLC			
3. NAICS Code 531390		4. Brief description of the character of business conducted in Rhode Island General contracting including remodeling, renovation and restoration			
5. State of Formation RI					
6. Principal Office Address 94 Calverley Street			City Providence	State RI	Zip 02908
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Neal Kaplan			Contact Title Member		
Street Address 94 Calverley Street			City Providence	State RI	Zip 02908
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. The Resident Agent information currently of record with the RI Department of State is accurate. 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 NEAL KAPLAN				Date 9-30-20	
Signature of Authorized Person <i>Neal Kaplan</i>					

## MAIL TO:

Division of Business Services

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