



State of Rhode Island

Department of State - Business Services Division

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.

FILED

OCT 26 2020

BY

467 DS

1. Entity ID Number <u>000151204</u>		2. Exact name of the Limited Liability Company <u>W.E.B. Real Estate, LLC</u>			
3. NAICS Code <u>53110</u>		4. Brief description of the character of business conducted in Rhode Island <u>Real Estate Rental & Leasing</u>			
5. State of Formation <u>RI</u>					
6. Principal Office Address <u>1300 Mendon Road</u>		City <u>Cumberland</u>		State <u>RI</u>	Zip <u>02864</u>
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name <u>CARMELO THERIEN</u>		Contact Title <u>OWNER</u>			
Street Address <u>same as above</u>		City		State	Zip
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 <u>CARMELO THERIEN</u>				Date <u>10-20-20</u>	
Signature of Authorized Person <u>Carmelo Therien</u>					

MAIL TO:

Division of Business Services

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Website: www.sos.ri.gov