

State of Rhode Island

## Department of State - Business Services Division

Annual Report for the year: 2021 **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.

2021 AUG -2 A 10: 25

1. Entity ID Number	2. Exact nar	2. Exact name of the Limited Liability Company				
MANU 155	Eve Properties, U.C.					
3. NAICS Code	4. Brief desc	4. Brief description of the character of business conducted in Rhode Island				
531701	10:1	estate			·	
5. State of Formation	- Keal	ESTA!			1	
Rhode Island						
6. Principal Office Address			City	State	Zip	
130 Earle Dr.			N. Kingstown	RI	02852	
7. Mailing Address of Limited L	iability Compar	ny and Name or	Title of Contact Person	·		
Contact Name Eling E Robbec	30n		Contact Title  Member			
Street Address \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			City V	State	Zip 82 85 2	
130 Earle 1) (		\ af the Limited	Liability Company, IF APPLICA	BLE - DO NOT LIST		
<del></del>	and addresses	) of the Exhited	Manager Name	BEE-BOHOT EIGT		
Manager Name			Wallagor (value			
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						
9. The Resident Agent inform	ation currently	of record with th	ne RI Department of State is ac	curate. Changes requ	ire filing Form 642.	
Under penalty of perjury, I of statements, and that all sta	declare and at	firm that I have	examined this report, include	ling any accompany	ing schedules and	
Name of Authorized Person				Date		
		_				
Signature of Authorized Pers						
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MAIL TO:

**Division of Business Services** 

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

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

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