

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.

R.I. DEPT. OF STATE BUS SYCS DIV

2021 AUG 16 P 4: 16.

1. Entity ID Number	2 Evact name	of the Limited Lia	hilliby Company		· · · · · · · · · · · · · · · · · · ·
00093314	_				
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island				
831110					•
5. State of Formation	Real Estate m. a. 1.				
2I	Real Estate Management				
6. Principal Office Address	<i>A</i> .		City	State	Zip
11 Halgry			Providence	RI	02906
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name AMER MALIK			Contact Title		
Street Address 11 Halfy 8r.		City Providence	State ~ (Zip 0 2906	
8. List ALL managers (names and addlesses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name			Manager Name (Single on ambeille		
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 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 Date					
AMER MALIK 401-465-3623 8/16/21					
Signature of Authorized Person (c)					
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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 FILED

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FORM 632 - Reviseti: 08/2020