RI SOS Filing Number: 202101190950 Date: 9/9/2021 4:00:00 PM

State of Rhode Island  Department of State - Business Services Division	<u> </u>
Annual Report for the year: 2021 Limited Liability Company	SEP 0 9 2021 00 1229
→ Filing period: September 1 - November 1	Cy 1221

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by December 1.

1. Entity ID Number	2. Exact na	2. Exact name of the Limited Liability Company					
1658436	1100 Wa	1100 Warren Ave, LLC					
3. NAICS Code 53 110 5. State of Formation Rhode Island		Brief description of the character of business conducted in Rhode Island     Real Estate and Rental					
		<del></del>	City	State	Zip		
Principal Office Address     Colvin Street			Hope	RI	02831		
7. Mailing Address of Limit	ed Liability Compa	ny and Name o	r Title of Contact Person				
Contact Name Anthony D. Altrui			Contact Title Manager				
Street Address 60 Colvin Street Box 357			City Hope	State RI	Zip 02831		
8. List ALL managers (nar	mes and addresses	s) of the Limited	Liability Company, IF APPLIC	ABLE - DO NOT LIST I	MEMBERS		
Manager Name		Manager Name					
Street Agai Go Guivin Street		Street Address 64 Call					
C:		- ,	City Hann	,	Zin		
Manager Name		<u> l</u>	Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
				Check the box to	indicate an attachment		
9. The Resident Agent info	ormation currently	of record with th	ne RI Department of State is a	ccurate. Changes requir	re filing Form 642		
Under penalty of perjury statements, and that all	/. I declare and aff	firm that I have	examined this report, inclu	ding any accompanyir	ng schedules and		
Name of Authorized Person				Date			
Anthony D. Altrui				9/4/20:	21 		
Signature of Authorized P	rejson Whry 2	Allin					

MAIL TO:

**Division of Business Services** 

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

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