RI SQS Filing Number: 202101918130 Date: 9/20/2021 4:00:00 PM

	•
نشند	~~
/€	100
1 18	18(, ))
10	
	* !

State of Rhode Island and Providence Plantations

## Department of State - Business Services Division

FRED

SEP 2 0 2021

STAMP

Annual Report for the year: 2021 **Limited Liability Company** 

→ Filing period: September 1 - November 1

→ Filing Fee: \$50.00

ş 🚈

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

			_
	1	$\sim 1$	180
4	AX.	$\alpha c$	esc

Entity ID Number	2. Exact name of the Limited Liability Company					
553786		mes Realty, LLC			•	
3. NAICS Code 531/10	4. Brief desc	ription of the cha	racter of business conducte	d in Rhode Island	<del> </del>	
53 - Real Estate and Rental and			d selling of residential and commercial properties			
5. State of Formation	1		•			
Rhode Island						
6. Principal Office Address			City	State	Zip	
282 Phenix Avenue			Cranston	RI	02920	
7. Mailing Address of Limited Lia	bility Company	and Name or Ti	ille of Contact Person			
Contact Name Stephanie Soscia			Contact Title Manager			
Street Address 282 Phenix Avenu			City Cranston	State RI	<sup>Zip</sup> 02920	
8. List ALL managers (names an	d addresses) (	of the Limited Lia	bility Company, IF APPLICA	BLE - DO NOT LIST	MEMBERS	
Manager Name Stephanie Soscia			Manager Name			
Street Address 282 Phenix Avenu	e		Street Address			
City Cranston	State RI	<sup>Zip</sup> 02920	City	State	Zip	
Manager Name		<u> </u>	Manager Name			
Street Address			Street Address			
City C	State	7:		<del> ,</del>		
	Oldie	Zip	City	State	Zip	
				Check the box to in	dicate an attachment	
Resident Agent in Rhode Island	l. This information	on is currently of re	cord with the Department of St	ate. Changes require filino	Form 642	
Under penalty of perjury, I decize statements, and that all statements.	re and affirm	that I have exam	mined this report includir	ng any accompanying	schedules and	
Name of Authorized Person		<del>-</del>	· <del>·</del>	Date 1	· · · · · · · · · · · · · · · · · · ·	
Stephanie Soscia				x 9-10	-2001	
Signature of Authorized Person	ni d	SIGN DO	CUMENT HERE			

MAIL TO:

Division of Business Services

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

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