



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.

FILING STAMP

SEP 21 2021

BY

3215

FOR
SECRETARY OF STATE
USE ONLY

DS

1. Entity ID Number 164141		2. Exact name of the Limited Liability Company MASSUD ENTERPRISES LLC			
3. NAICS Code 531120		4. Brief description of the character of business conducted in Rhode Island to own and develop real estate			
5. State of Formation Rhode Island					
6. Principal Office Address 772 Dexter Street		City Central Falls		State RI	Zip 02863-0000
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Joseph M. Massud		Contact Title Manager			
Street Address 772 Dexter Street		City Central Falls		State RI	Zip 02863-0000
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name N/A		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 Joseph M. Massud				Date 09/07/2021	
Signature of Authorized Person				Manager	

MAIL TO:

Division of Business Services

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

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