



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.

**FILED STAMP**

SEP 22 2021

BY 2338

1. Entity ID Number <b>000506036</b>		2. Exact name of the Limited Liability Company <b>BARBOSA PROPERTIES, LLC</b>			
3. NAICS Code 531120		4. Brief description of the character of business conducted in Rhode Island TO OWN AND OPERATE REAL ESTATE			
5. State of Formation RHODE ISLAND					
6. Principal Office Address 205 NORTH BROW STREET			City EAST PROVIDENCE	State RI	Zip 02914
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name EDWARD S. BARBOSA			Contact Title MANAGER		
Street Address 45 BRIAN HOLLOW ROAD			City COVENTRY	State RI	Zip 02816
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name N/A		Manager Name N/A			
Street Address		Street Address			
City	State	Zip	City	State	Zip
Manager Name N/A		Manager Name N/A			
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.					
<i>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.</i>					
Name of Authorized Person EDWARD S. BARBOSA				Date 9/15/21	
Signature of Authorized Person ✓ <i>Edward Barbosa</i>					

**MAIL TO:**  
**Division of Business Services**  
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**Phone:** (401) 222-3040  
**Website:** www.sos.ri.gov