



State of Rhode Island  
**Department of State - Business Services Division**

**FILED**

OCT 4 2021

BY AL 1096

**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.

1. Entity ID Number <b>788023</b>		2. Exact name of the Limited Liability Company <b>SALVATORE AND SONS, LLC</b>			
3. NAICS Code 531110		4. Brief description of the character of business conducted in Rhode Island Real Estate Management			
5. State of Formation Rhode Island					
6. Principal Office Address 122 North River Drive		City Narragansett	State RI	Zip 02882	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Marguerite Salvatore			Contact Title Manager		
Street Address 122 North River Drive		City Narragansett	State RI	Zip 02882	
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name Marguerite Salvatore		Manager Name Antonio Salvatore			
Street Address 122 North River Drive		Street Address 122 North River Drive			
City Narragansett	State RI	Zip 02822	City Narragansett	State RI	Zip 02822
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.					
<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 Marguerite Salvatore				Date 9-30-2021	
Signature of Authorized Person 					

**MAIL TO:**  
 Division of Business Services  
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