State of Rhode Island

Department of State - Business Services Division

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BY 35283

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	2. Exact name of the Limited Liability Company
548923	**Group 21, LLC**
3. NAICS Code 531390	4. Brief description of the character of business conducted in Rhode Island Realty
5. State of Formation Rhode Island	

6. Principal Office Address	City	State	Zip
190 Hillside Road	Cranston	RI	02920

7. Mailing Address of Limited Liability Company and Name or Title of Contact Person

Contact Name	Contact Title		
Sandeep Jaiswal	Member		
Street Address	**City**	**State**	**Zip**
P.O. Box 8569	Cranston	RI	02920

8. List **ALL** managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - **DO NOT LIST MEMBERS**

Manager Name			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 ☐

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	Date
Sandeep Jaiswal	11-16-21
Signature of Authorized Person	

MAIL TO:
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