



State of Rhode Island  
Department of State - Business Services Division

Annual Report for the year: 2022  
Corporation

MAR 23 2022  
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- Filing period: February 1 - May 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by May 31.

|  |             |   |  |                 |              |
|--|-------------|---|--|-----------------|--------------|
| 1. Entity ID Number<br>21209   |             | 2. Exact name of the Corporation<br>Riviera Realty, Inc.  |  |                 |              |
| 3. Principal Office Address<br>20 Lark Industrial Parkway  |             |   | City<br>Smithfield                           | State<br>RI     | Zip<br>02828 |
| 4. NAICS Code<br>531390  |             | 6. Brief description of the character of business conducted in Rhode Island<br>Real estate holding company            |  |                 |              |
| 5. State of Incorporation<br>Rhode Island  |             |   |  |                 |              |
| 7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>   |             |   |  |                 |              |
| President Name<br>John A. Rocchio, Jr.   |             |   | Vice-President Name<br>John A. Rocchio, Jr.  |                 |              |
| Street Address<br>20 Lark Industrial Parkway   |             |   | Street Address<br>20 Lark Industrial Parkway |                 |              |
| City<br>Smithfield   | State<br>RI | Zip<br>02828  | City<br>Smithfield                           | State<br>RI     | Zip<br>02828 |
| Secretary Name<br>John A. Rocchio, Jr.   |             |   | Treasurer Name<br>John A. Rocchio, Jr.       |                 |              |
| Street Address<br>20 Lark Industrial Parkway   |             |   | Street Address<br>20 Lark Industrial Parkway |                 |              |
| City<br>Smithfield   | State<br>RI | Zip<br>02828  | City<br>Smithfield                           | State<br>RI     | Zip<br>02828 |
| 8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>  |             |   |  |                 |              |
| Director Name<br>John A. Rocchio, Jr.  |             |   | Director Name                                |                 |              |
| Street Address<br>20 Lark Industrial Parkway   |             |   | Street Address                               |                 |              |
| City<br>Smithfield   | State<br>RI | Zip<br>02828  | City   | State           | Zip          |
| Director Name  |             |   | Director Name                                |                 |              |
| Street Address   |             |   | Street Address                               |                 |              |
| City   | State       | Zip   | City   | State           | Zip          |
| 9. Shares Authorized   |             | 10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span> |  |                 |              |
| This information is currently of record in the Department of State.<br><br>Changes require an additional filing.   |             | NUMBER OF SHARES  | CLASS/SERIES                                 | PAR VALUE       |              |
|  |             | 200   | Common                                       | No Par Value    |              |
| 11. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.<br><b>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.</b> |             |   |  |                 |              |
| Name of Authorized Representative<br>John A. Rocchio, Jr.   |             |   |  | Date<br>3/15/22 |              |
| Signature of Authorized Representative   |             |   |  |                 |              |

MAIL TO:  
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