	State of F Office of the S	Rhode Island Secretary of		Fee: \$50.00
Division Of Business Services				
148 W. River Street				
Providence RI 02904-2615				
1630	(401)	222-3040		
Limited Liability Annual Report Filing Period: Feb.				
refusing to file its	h R.I.G.L. 7-16-66(d), each limitec annual report within thirty (30) da -66(b&c)) is subject to a penalty fe	/s after the tim		/
ANNUAL REPOR	T YEAR: <u>2023</u>			
1. ID No. <u>000</u>	150145			
2. Exact Name of the Limited Liability Company <u>49 BRADFORD STREET, LLC.</u>				
3. State of Form	ation			
State: <u>RI</u>				
ARTICLE III				
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.				
<u>236115</u>				
4. Brief Descript Island	ion of the Character of the Busin	ess Which is <i>I</i>	Actually Condu	cted in Rhode
CONSTRUCTIO	ON OFFICE/RENTALS			
5. Principal Offic	ce Address			
No. and Street:	<u>C/O JAMES P. TAVARES</u> <u>2 KYALIN AV</u>			
City or Town:	WARREN	State: <u>RI</u>	Zip: <u>02809</u>	Country: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:				
Contact Name: No. and Street:	JAMES P. TAVARES Contact Title C/O JAMES P. TAVARES 2 KYALIN AV	: <u>OWNER</u>		
City or Town:	WARREN	State: <u>RI</u>	Zip: <u>02809</u>	Country: <u>USA</u>
			2ip. <u>02009</u>	<u>004</u>

7. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

JAMES P. TAVARES 2 KYALIN AVENUE WARREN , RI 02885

8. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 20 Day of January, 2023 at 10:11:06 AM by the authorized person. This

electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.

By JAMES P. TAVARES

Signature of Authorized Person

Form No. 632 Revised 09/07

© 2007 - 2023 State of Rhode Island All Rights Reserved