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Department of State - Business Services Division

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Annual Report for the year: $\frac{2023}{}$ **Limited Liability Company**

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

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2023 MAY 23 P 2: 06

1. Entity ID Number 001677810	2. Exact name of the Lit	2. Exact name of the Limited Liability Company IAB, LLC		
3. NAICS Code 531390 5. State of Formation	.	Brief description of the character of business conducted in Rhode Island Real Estate Holding Company.		
Rhode Island				
6. Principal Office Address PO Box 10266		City Cranston	State RI	Zip 02910
7. Mailing Address of Limite	ed Liability Company and Nam	e or Title of Contact Person		
Contact Name Robert Pesapane		Contact Title Sole Member		
Street Address PO Box 10266		City Cranston	State RI	^{Zip} 02910
8. The Resident Agent infor	mation currently of record with	the RI Department of State is acci	urate. Changes requir	e filing Form 642.
	l declare and affirm that I ha tatements contained herein	ve examined this report, includir are true and correct.	ng any accompanyin	g schedules and
Name of Authorized Person Robert Pesapane, S	•		Date	
Signature of Authorized Per	rson			

FILED

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov