

2023 MAY 26 PM 1:13

Annual Report for the year: \_ **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.

1. Entity ID Number	2. Exact name of the Limited Liability Company			
001035220	SPK LLC			
3. NAICS Code	Brief description of the character of business conducted in Rhode Island			
531 390	Real Estate ownership			
5. State of Formation	_	•		
Rhode Island				
6. Principal Office Address	4 14 6	City	State	Zip
1075 PARK AVEC	10+ 7 140	New York	NY	10128
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name Stuart	Katz	Contact Title MFMBFR		
Street Address 1075 PARK A VENUE #146		City New York	State NY	zip 10128
8. 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 Stuart Kotz  Date 5/23/23				
Signature of Authorized Person				

FILED

MAY 26 2023

AA.1:15pm.

MAIL TO:

**Division of Business Services** 

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

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