



**State of Rhode Island  
Department of State - Business Services Division**

Annual Report for the year: **2024**

Corporation \_\_\_\_\_

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

**FILED**  
FEB 05 2024  
EX: *[Signature]*  
*[Signature]*

1. Entity ID Number <b>000978252</b>		2. Exact name of the Corporation <b>337 Broad Street Inc</b>			
3. Principal Office Address <b>337 Broad Street</b>			City <b>Providence</b>	State <b>RI</b>	Zip <b>02907</b>
4. NAICS Code <b>531120</b>		6. Brief description of the character of business conducted in Rhode Island <b>Property Management</b>			
5. State of Incorporation <b>RI</b>					
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name <b>Michelle Lee</b>			Vice-President Name <b>Voissane Tan</b>		
Street Address <b>21 Palm Blvd</b>			Street Address <b>448 East 20th Street</b>		
City <b>Warwick</b>	State <b>RI</b>	Zip <b>02888</b>	City <b>New York</b>	State <b>NY</b>	Zip <b>10009</b>
Secretary Name <b>Nhep Tan</b>			Treasurer Name <b>Veasna Tan</b>		
Street Address <b>21 Palm Blvd</b>			Street Address <b>4774 Coronado Avenue</b>		
City <b>Warwick</b>	State <b>RI</b>	Zip <b>02888</b>	City <b>San Diego</b>	State <b>CA</b>	Zip <b>90107</b>
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name <b>Nhep Tan</b>			Director Name <b>Voissane Tan</b>		
Street Address <b>21 Palm Blvd</b>			Street Address <b>448 East 20th Street</b>		
City <b>Warwick</b>	State <b>RI</b>	Zip <b>02888</b>	City <b>New York</b>	State <b>NY</b>	Zip <b>1009</b>
Director Name <b>Michelle Lee</b>			Director Name <b>Veasna Tan</b>		
Street Address <b>21 Palm Blvd</b>			Street Address <b>4774 Coronado Avenue</b>		
City <b>Warwick</b>	State <b>RI</b>	Zip <b>02888</b>	City <b>San Diego</b>	State <b>CA</b>	Zip <b>90107</b>
9. Shares Authorized <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.  Changes require an additional filing.		10. Shares Issued		CLASS/SERIES	
		NUMBER OF SHARES		PAR VALUE	
		<b>10000</b>	<b>CWP</b>	<b>.01</b>	
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.					
<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 <b>Michelle Lee, President</b>				Date <b>1/31/24</b>	
Signature of Authorized Representative <i>[Signature]</i>					

MAIL TO:  
Division of Business Services  
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Website: www.sos.ri.gov