



**State of Rhode Island  
Office of the Secretary of State**

Fee: \$50.00

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

**Limited Liability Company  
Annual Report**

Filing Period: February 1 - May 1

*In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.*

**ANNUAL REPORT YEAR - ENTER THE CURRENT YEAR 2024:** 2024

1. ID No. 001726304

2. Exact Name of the Limited Liability Company Ayoub Realty, LLC

3. State of Formation

State: RI

**NAICS CODE**

Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes [here](#). More information on [NAICS](#) can be found online.

531190

**4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island**

TO ACQUIRE BY PURCHASE, LEASE, GIFT, DEVISE, OR OTHERWISE, AND TO OWN, USE, HOLD, SELL, CONVEY, EXCHANGE, LEASE, MORTGAGE, WORK, IMPROVE, DEVELOP, DIVIDE, AND OTHERWISE HANDLE, DEAL IN, AND DISPOSE OF REAL ESTATE, REAL PROPERTY, AND ANY INTEREST OR RIGHT THEREIN, WHETHER AS PRINCIPAL, AGENT, BROKER OR OTHERWISE AND TO MANAGE, OPERATE, SERVICE, EQUIP, FURNISH, ALTER AND KEEP IN REPAIR DWELLINGS, APARTMENT HOUSES, HOTELS, OFFICE BUILDINGS AND REAL AND PERSONAL PROPERTY OF EVERY KIND, NATURE AND DESCRIPTION, WHETHER AS PRINCIPAL, AGENT, BROKER OR OTHERWISE, AND GENERALLY TO

DO

ANYTHING AND EVERYTHING NECESSARY AND PROPER TO THE EXTENT PERMITTED BY LAW  
IN CONNECTION WITH THE OWNING, MANAGING, LEASING AND OPERATING REAL AND  
PERSONAL PROPERTY OF ANY AND ALL KIND AND ANY OTHER LAWFUL BUSINESS  
ACTIVITY AND DEALING IN ANY AND ALL INVESTMENT OPPORTUNITIES.

**5. Principal Office Address**

No. and Street: 358 ELMWOOD AVENUE  
City or Town: PROVIDENCE State: RI Zip: 02907 Country: USA

**6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:**

Contact Name: MICHEAL AYOUB Contact Title:  
No. and Street: 358 ELMWOOD AVENUE  
City or Town: PROVIDENCE State: RI Zip: 02907 Country: USA

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

MICHAEL K. ROBINSON, ESQUIRE 111 AIRPORT ROAD, SUITE 1 WARWICK , RI 02889

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

**Signed this 16 Day of February, 2024 at 2:13:10 PM 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 MICHEAL AYOUB  
Signature of Authorized Person

Form No. 632  
Revised 09/07

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