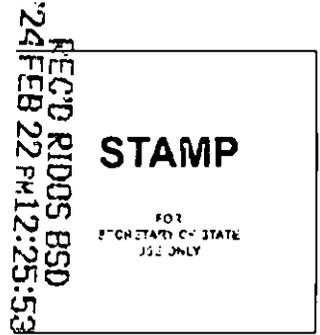




**State of Rhode Island  
Department of State - Business Services Division**



Annual Report for the year: 2024  
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 <b>001676785</b>		2. Exact name of the Limited Liability Company <b>MAB Enterprises, LLC</b>		
3. NAICS Code <b>531390</b>		4. Brief description of the character of business conducted in Rhode Island <b>Real Estate rental and ownership</b>		
5. State of Formation <b>RI</b>				
6. Principal Office Address <b>1833 Cranston Street</b>		City <b>Cranston</b>	State <b>RI</b>	Zip <b>02920</b>
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name <b>Michael Bert - Sandra Bert</b>		Contact Title <b>Owners</b>		
Street Address <b>1833 Cranston Street</b>		City <b>Cranston</b>	State <b>RI</b>	Zip <b>02920</b>
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.				
9. 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 <b>Michael A Bert</b>			Date <b>1/18/24</b>	
Signature of Authorized Person <i>Michael A Bert</i>				

**FILED**

**FEB 22 2024**

**BY 1450 AA**

**MAIL TO:**

**Division of Business Services**  
148 W. River Street, Providence, Rhode Island 02904-2615  
**Phone:** (401) 222-3040  
**Website:** www.sos.ri.gov