



State of Rhode Island
Department of State - Business Services Division

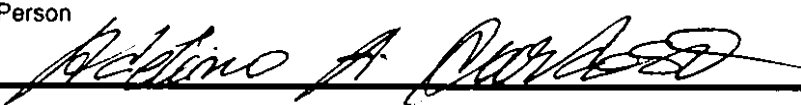
FILED

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BY 3747
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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 920062		2. Exact name of the Limited Liability Company CARDOSO ENTERPRISE, LLC	
3. NAICS Code 531120		4. Brief description of the character of business conducted in Rhode Island REAL ESTATE	
5. State of Formation RHODE ISLAND			
6. Principal Office Address 12 Edgemont Avenue		City Cumberland	State RI
		Zip 02864	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name ADELINO A. CARDOSO		Contact Title MANAGER	
Street Address 12 Edgemont Avenue		City Cumberland	State RI
		Zip 02864	
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 ADELINO A. CARDOSO, MANAGER			Date 3-24-24
Signature of Authorized Person 			

MAIL TO:

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