



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.

REC'D RIDOS BSD
 24 MAY 1 PM 1:17:51

1. Entity ID Number 000151636		2. Exact name of the Corporation 000151636 Mastermind Realty Corp			
3. Principal Office Address 11 South Angel St #351			City Providence	State RI	Zip 02906
4. NAICS Code 531190		6. Brief description of the character of business conducted in Rhode Island Own. Market. Sell Real Estate			
5. State of Incorporation Rhode Island					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Manilay Khamsyvoravong			Vice-President Name Manilay Khamsyvoravong		
Street Address 11 South Angel St #351			Street Address 11 South Angel St #351		
City Providence	State RI	Zip 02906	City Providence	State RI	Zip 02906
Secretary Name Manilay Khamsyvoravong			Treasurer Name Manilay Khamsyvoravong		
Street Address 11 South Angel St #351			Street Address 11 South Angel St #351		
City Providence	State RI	Zip 02906	City Providence	State RI	Zip 02906
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Manilay Khamsyvoravong			Director Name		
Street Address 11 South Angel St #351			Street Address		
City Providence	State RI	Zip 02906	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized			10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>		
This information is currently of record in the Department of State. Changes require an additional filing.			NUMBER OF SHARES		
			CLASS/SERIES		
			PAR VALUE		
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.					
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 Representative Manilay Khamsyvoravong			FILED 417		Date 4/30/2024
Signature of Authorized Representative 			MAY 1 2024 B1K37		