

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

Annual Report for the year: 2021 **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	2 Eyest name of the Limited L	2 Event name of the Limited Link (in Comme			
	2. Exact name of the Limited Liability Company				
001676514	Alipore Realty LLC	Alipore Realty LLC			
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island				
531120	LETTING OUT OF CO	LETTING OUT OF COMMERCIAL REAL ESTATE PROPERTY			
5. State of Formation	7				
RI					
6. Principal Office Address		City	State	Zip	
7 DUNNELL LANE		PAWTUCKET	RI	02860	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name SHEKHAR MEHTA		Contact Title MANAGER			
Street Address 91 GOODNOW ROAD		City SUDBURY	State MA	<sup>Zip</sup> 01776	
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			Date		
SHEKHAR MEHTA			MANAGER		
Signature of Authorized Person					

FILED

MAIL TO:

**Division of Business Services** 

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov