



State of Rhode Island  
Department of State - Business Services Division

Annual Report for the year: 2025  
Corporation

- Filing period: February 1 - May 1  
→ Filing Fee: \$50.00  
→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

**FILED**

JAN 02 2025

BY 5533

1. Entry ID Number <u>000002230</u>		2. Exact name of the Corporation <u>BelleVue Real Estate, Inc</u>	
3. Principal Office Address <u>65 Bellevue Avenue</u>		City <u>Newport</u>	State <u>RI</u> Zip <u>02840</u>
4. NAICS Code <u>531110</u>	6. Brief description of the character of business conducted in Rhode Island <u>Real Estate Development, Brokerage, and other Related Services and Rentals &amp; Leasing, Appraisals</u>		
5. State of Incorporation <u>Rhode Island</u>			
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
President Name <u>Vincent A Marcello</u>		Vice-President Name	
Street Address <u>179 Eastis Avenue</u>		Street Address	
City <u>Newport</u>	State <u>RI</u>	Zip <u>02840</u>	
Secretary Name		Treasurer Name	
Street Address		Street Address	
City	State	Zip	
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
Director Name		Director Name	
Street Address		Street Address	
City	State	Zip	
Director Name		Director Name	
Street Address		Street Address	
City	State	Zip	
9. Shares Authorized This information is currently of record in the Department of State. Changes require an additional filing.		10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>	
		NUMBER OF SHARES <u>100</u>	CLASS/SERIES <u>- 0 -</u>
		PAR VALUE <u>No Par</u>	
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 <u>Vincent A Marcello</u>		Date <u>12/31/2024</u>	
Signature of Authorized Representative <u>[Signature]</u>			

MAIL TO:  
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