

State of Rhode Island

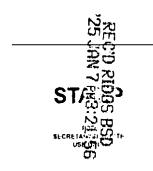
Department of State - Business Services Division

Annual Report for the year: 2023 **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 001719017	Exact name of the Limited Liability Company Box			
3. NAICS Code 531110	4. Brief description of the character of business conducted in Rhode Island RESIDENTIAL RENTAL PROPERTY			
5. State of Formation RI				
6. Principal Office Address		City	State	Zip
4 Brookside Trail		South Salem	NY	10590
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name Robert Markowitz		Contact Title Manager		
Street Address 4 Brookside Trail		City South Salem	State NY	^{Zip} 10590
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 deaning this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.				
Name of Authorized Person			Date	
Robert Markowitz			1-7-2025	
Signature of Authorized Person				

JAN 7 2025 3:20

MAIL TO:

Division of Business Services

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

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