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State of Rhode Island Department of State - Business Services Division

Annual Report for the year: 2025
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.

FILED	STAMP
JAN 23 2025	• ,
BY 227	USE OFF

1. Entity ID Number	2. Exact name of the Limited Liability Company			
000150256 KB Real Ty associates LLS				
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island			
331110	1110 Leesors CF Building			
5. State of Formation				
R 1_				
6. Principal Office Address		City	State	Zip
1280 OAKL	OWN Are	CRANSTUN	RI	02/20
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name Contact Title				
Kobert	rt Roy member			
Street Address 75 FYMKLIV	Rd	City. F.OSTEY	State アエ	2ip 07325
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	-
Rubert	Roy		1/13/2/	<u> </u>
Signature of Authorized Person				
dill dit				

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

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