

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.

 2025 MAR -4	11/20084371 70/130843 819348
AK 10:	
2	:

1. Entity ID Number	2. Exact name of the Limited Liability Company				
001731709	TAMBOUR PROPERTIES, LLC				
3. NAICS Code 531390	4. Brief description of the character of business conducted in Rhode Island - Real ESTAL Holder				
5. State of Formation RI	- Julia Coll	THE TRACEIN)		
6. Principal Office Address		City	State	Zip	
21 SLOCUM STREET		NEWPORT	RI	02840	
7. Mailing Address of Limited L	iability Company and Name or Ti	le of Contact Person	L	I	
Contact Name ALFRED T. MARCIANO		Contact Title CPA			
Street Address 18 IMPERIAL PLACE, SUITE 1D		City PROVIDENCE	State RI	^{Zip} 02903	
8. The Resident Agent informa	tion currently of record with the R	Department of State is accurate	. Changes requir	e filing Form 642.	
	declare and affirm that I have e ements contained herein are tru		any accompany	ring schedules and	
Name of Authorized Person			Date 2/28/25		
ALFRED T. MARCIANO, CPA			3/28/25		
Signature of Authorized Person	Cuplle:		•		

FILED

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MAIL TO:

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