

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

**FILED** 

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.

1. Entity ID Number <b>000522552</b>	2. Exact name of the Limited Liability Company 990 Cranston Street, LLC				
3. NAICS Code <b>531311</b>	· ·	Brief description of the character of business conducted in Rhode Island     real estate management			
5. State of Formation RI					
6. Principal Office Address 851 Matteson Road		City Coventry	State RI	Zip <b>02816</b>	
7. Mailing Address of Limite	ed Liability Company and Name of	or Title of Contact Person		I	
Contact Name Nicholas Manocchia		Contact Title Manager			
Street Address 851 Matteson Road		City Coventry	State RI	Zip <b>02816</b>	
8. The Resident Agent infor	mation currently of record with th	ne RI Department of State is a	ccurate. Changes requ	ire filing Form 642.	
Under penalty of perjury, statements, and that all s	l declare and affirm that I have latements contained herein are	examined this report, include true and correct.	ding any accompanyi	ing schedules and	
Name of Authorized Person			Date		
Nicholas Manocchia			3/2/25		
Signature of Authorized Per		$\overline{\bigcirc}$	, ,		

MAIL TO:

**Division of Business Services** 

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

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