RI SOS Filing Number: 202569134170 Date: 4/3/2025 4:00:00 PM



State of Rhode Island

Department of State - Business Services Division

| Annual Report for the year: | 2 |
|-----------------------------|---|
| Partnership (LP, LLP, LLLP) | _ |

2025

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

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|---|-------------------------------|--|--|------------------------|----------------------|--|--|--|
| 1. Entity ID Number | 2. Exact Name | 2. Exact Name of the Partnership | | | | | | |
| 000120347 | 1923 Post | 1923 Post Road Associates, LP | | | | | | |
| 3. NAICS Code | 4. Brief descrip | Brief description of the character of business conducted in Rhode Island | | | | | | |
| 531120 | | | | | | | | |
| 5. State of Formation | The Acquisi | The Acquisition of Real Estate | | | | | | |
| 6. Principal Office Address | | City State Zip | | | Zip | | | |
| 101 Plain Street, 1st Floor, Suite 100 | | | Providence | RI | 02903 | | | |
| 7. The name and business a LP and LLLP only: an amendme | ddress of each gen | eral partner or o | ne or more partner(s): | 301 (domestic) or Form | 351 (foreian). | | | |
| | | BUSINESS ADDRESS | | | | | | |
| David 98 Corp. | | 101 Plain Street, 1st Flr, Suite 100, Providence, RI 02903 | | | | | | |
| | | | | ··· | | | | |
| | | 7:2 | <u>. </u> | | | | | |
| | | | | | | | | |
| 8. Under penalty of perjury, I and correct. | declare and affirm | that I have exan | nined this report, and tha | t all statements conta | ined herein are true | | | |
| Name of General Partner or Authorized Representative | | | | Date | Date | | | |
| Stefania M. Mardo | | | | 3.28.25 | | | | |
| Signature of General Partners | er or Authorized Ri _ mm_a | · | | • | | | | |
| /) | | | | | | | | |

MAIL TO:

Division of Business Services

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

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

