

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

Annual Report for the year: **Limited Liability Company**

2025

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2025 HAR 31 P 2: 11

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 2005 APR 16 P 12: 20

1. Entity ID Number	2. Exact name of the Limited Liability Company			
001762509	Broad Street RITTUST, LLC			
3. NAICS Code	Brief description of the character of business conducted in Rhode Island			
531110	APARTMENT RENTALS			
5. State of Formation				
DE				
6. Principal Office Address	1	City	State	Zip
63 ATLANTIC AVE		BOSTON	MA	02110
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name RISHAB THAOA		Contact Title ACCOUNTANT		
Street Address 63 ATLANTIC AVE		City BOSTON	State MA	^{Z₁p} 02110
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	
RISHAB THAPA			3/20/25	
Signature of Authorized Person				

MAIL TO:

Division of Business Services

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