



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2023

Corporation

- Filing period: February 1 - May 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by May 31.

STAMP
 RECEIVED FOR
 DEPT. OF STATE
 BUSINESS SERVICES DIVISION
 2023 FEB 14 A 11:09

1. Entity ID Number 001709477		2. Exact name of the Corporation The Seyboth Team Real Estate, Inc.			
3. Principal Office Address 969 Waterman Avenue			City East Providence	State RI	Zip 02914
4. NAICS Code 531210		6. Brief description of the character of business conducted in Rhode Island real estate agency			
5. State of Incorporation MA					
7. List ALL officers (names and addresses)					Check the box to indicate an attachment <input type="checkbox"/>
President Name Kyle F. Seyboth			Vice-President Name		
Street Address 969 Waterman Avenue			Street Address		
City East Providence	State RI	Zip 02914	City	State	Zip
Secretary Name			Treasurer Name Kyle F. Seyboth		
Street Address			Street Address 969 Waterman Avenue		
City	State	Zip	City East Providence	State RI	Zip 02914
8. List ALL directors (names and addresses)					Check the box to indicate an attachment <input type="checkbox"/>
Director Name Kyle F. Seyboth			Director Name		
Street Address 969 Waterman Avenue			Street Address		
City East Providence	State RI	Zip 02914	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized		10. Shares Issued			
This information is currently of record in the Department of State. Changes require an additional filing.		Check the box to indicate an attachment <input type="checkbox"/>			
		NUMBER OF SHARES		CLASS/SERIES	
		200 Common Shares with 0.01 Par Value			
11. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.					
<i>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.</i>					
Name of Authorized Representative Kyle F. Seyboth				Date 2/4/23	
Signature of Authorized Representative 					

FILED
 FEB 14 2023
 BY 23WOK

MAIL TO:
 Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040
 Website: www.sos.ri.gov