State of Rhode Isla	nd Fee: \$50.00
Office of the Secretary of	of State
Division Of Business Ser	vices
148 W. River Street Providence RI 02904-20	515
1636 (401) 222-3040	015
Limited Liability Company	
Annual Report Filing Period: February 1 - May 1	
In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by	
law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.	
ANNUAL REPORT YEAR - ENTER THE CURRENT YEAR 2024: 2024	
1. ID No. <u>001691238</u>	
2. Exact Name of the Limited Liability Company 773 Front Street LLC	
3. State of Formation	
State: <u>RI</u>	
NAICS CODE	
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.	
<u>531120</u>	
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island	
LESSOR	
5. Principal Office Address	
No. and Street: 73 MT. PLEASANT ROAD	
City or Town: <u>NORTH SMITHFIELD</u> State:	<u>RI</u> Zip: <u>02896</u> Country: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:	
Contact Name: JOHN RUSSO Contact Title: OWNER	
No. and Street: <u>73 MT. PLEASANT ROAD</u>	
City or Town: <u>NORTH SMITHFIELD</u> State: R	RI Zip: <u>02896</u> Country: <u>USA</u>
7. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11	
JOHN J. RUSSO 73 MT PLEASANT ROAD NORTH SMITHFIELD , RI 02896	

8. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 5 Day of February, 2024 at 10:50:06 AM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By JOHN RUSSO

Signature of Authorized Person

Form No. 632 Revised 09/07

© 2007 - 2024 State of Rhode Island All Rights Reserved