RI SOS Filing Number: 202453295150 Date: 4/30/2024 1:32:00 PM



State of Rhode Island Office of the Secretary of State

Fee: \$50.00

Division Of Business Services 148 W. River Street Providence RI 02904-2615 (401) 222-3040

Business Corporation Annual Report

Filing Period: February 1 - May 1

In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR - ENTER THE CURRENT YEAR **2024**: 2024

1. Corporate ID No. 000023290

2. Name of Corporation LISANN CORPORATION

3. Street Address Principal Business Office:

No. and Street: 901 BROADWAY

City or Town: <u>EAST PROVIDENCE</u> State: <u>RI</u> Zip: <u>02914</u> Country: <u>USA</u>

4. Business Phone No.

4014347745

5. State of Incorporation

State: RI

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.

531390

6. Brief Description of the Character of Business Conducted in Rhode Island

REAL ESTATE, PROPERTY MANGEMENT SERVICES

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country	
TREASURER	JOHN E REBELLO III	P.O. BOX 16451 EAST PROVIDENCE, RI 02914 USA	
SECRETARY	JOHN E REBELLO III	P.O. BOX 16451 EAST PROVIDENCE, RI 02916 USA	
VICE PRESIDENT	CLAIRE L REBELLO	901 BROADWAY EAST PROVIDENCE, RI 02914 USA	
PRESIDENT	JOHN E REBELLO, JR.	901 BROADWAY EAST PROVIDENCE, RI 02914 USA	
DIRECTOR	JOHN E REBELLO III	P.O. BOX 16451 EAST PROVIDENCE, RI 02916 USA	
DIRECTOR	JOHN E REBELLO IV	901 BROADWAY EAST PROVIDENCE, RI 02914 USA	

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per		Total Issued and
		Share	Total Authorized	١
			Shares Number of Shares	Num of Shares
			Transcer of Shares	Situres
CNP		\$0.0000	1,000.00	500

9. 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.

Signed this 30 Day of April, 2024 at 1:35:32 PM. 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 corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.

By JOHN E. REBELLO III

Signature of Authorized Representative of the Corporation

Form No. 630 Revised 09/07

© 2007 - 2024 State of Rhode Island All Rights Reserved