

A. Ralpb Mollis, Secretary of State Corporations Division 148 W. River Street Providence, RI 02904-2615

401.222.3040

## LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2011

Filing Period: September 1 - November 1 - Filing Fee: \$50.00\* - THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.

\* 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 (besc)) is subject to a penalty fee of \$25.00.

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1. 1D No. 2. Exact name of the limited liability company 132723 V. A. Bruzzese and A.M. Bruzzese, LLC						
3. State of Formation 4. Brief description of the character of the business which is actually conducted in Rhode Island  Recl Estate						
5. Principal office address  56 Pc500	Circle		Warnick	State	<sup>Zip</sup> 02886	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:  Contact Tule						
Vincent A	t 13ruzz	ese	Monger +	Member		
Street Address Pasc	o Circle	2	Werwick	State	<sup>240</sup> 02886	
7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE - DO NOT LIST MEMBERS FILL IN SPACES BEFORE USING ATTACHMENTS ("X" BOX FOR ATTACHMENT)						
Manager Name Vincent A Bruzzesz			Manager Name Ada M Bruzzese			
Street Address 56 Posco Civole			Street Address 56 PCSCO Civile			
Cay Warwick	State	02886	Cuy Wovwich	State Z L	02886	
Manager Name Manager Name						
Street Address			Street Address			
Cuy	State	Ztp	City	State	Zip	
8. RESIDENT AGENT IN RHODE ISLAND This information is currently of record in the Office of the Secretary of State. Changes require filing of Form 642 - R.I.G.L. 7-16-11						

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

	FILED
File Date	NOV 1 0 2011
Check No	7 201
By . <b>BY</b>	2300
FO	R SECRETARY OF STATE USE ONLY

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.

Vincent A Bruzzese Print or Type Name of Authorized Person

Form 632 Rev. 08/08