



State of Rhode Island and Providence Plantations  
Office of the Secretary of State

Fee: \$50.00

Corporations Division  
148 W. River Street  
Providence, Rhode Island 02904-2615  
Telephone: (401) 222-3040

**Limited Liability Company  
Annual Report**

Filing Period: September 1 - November 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:** 2008

**1. ID No.** 000161900

**2. Exact Name of the Limited Liability Company** Heroica's Painting, LLC

**3. State of Formation**

State: RI

**4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island**

Heroica's Painting is a Rhode Island based company that is completely devoted to the satisfaction of its customers. Our founder has over 20 years of experience in interior and exterior painting, in commercial and residential markets throughout New England. As a growing company, Heroica's is proud to state that we offer affordable rates, professional and quality workmanship. We are also proud to state we have the machinery and necessary equipment to effectively and efficiently handle all kinds of painting jobs. Heroica's certifications include OSHA 10HR Construction Safety Course and Lead-Based Paint Abatement.

**5. Principal Office Address**

No. and Street: 109 STANSBURY STREET  
City or Town: PROVIDENCE State: RI Zip: 02908 Country: USA

**6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:**

Contact Name: JHONNY LEYVA Contact Title: VICE-PRESIDENT  
No. and Street: 109 STANSBURY ST  
City or Town: PROVIDENCE State: RI Zip: 02908 Country: USA

**7. Name and Address of Each Manager of the Limited Liability Company, if Applicable.  
DO NOT LIST MEMBERS**

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
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**8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER  
Changes Require Filing of Form 642 - R.I.G.L. 7-16-11**

YONNY LEYVA 109 STANSBURY STREET PROVIDENCE , RI 02908-

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

**Signed this 5 Day of September, 2008 at 11:25:02 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 JHONNY LEYVA  
Signature of Authorized Person

Form No. 632  
Revised 09/07

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