



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Matthew A. Brown, Secretary of State

Corporations Division
100 North Main Street
Providence, RI 02903-1331
401.222.3020

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2003

Filing Period: September 1 - November 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. ID No. 102055		2. Exact name of the limited liability company J.R. Music Supply LLC	
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island SALES OF STRINGED INSTRUMENTS AND ACCESSORIES	
5. Principal office address 93 HAZEI STREET		City WOONSOCKET	State RI
		Zip 02895	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name DANIEL LANDI		Contact Title GENERAL MGR / CONTROLLER	
Street Address 93 HAZEI STREET		City WOONSOCKET	State RI
		Zip 02895	
7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE FILL IN SPACES BEFORE USING ATTACHMENTS ("X" BOX FOR ATTACHMENT) ☐ ANY MODIFICATIONS TO MANAGERS REQUIRES FILING OF AMENDMENT, R.I.G.L. 7-16-12 (a) (2) / 7-16-52			
Manager Name JAKOB KOWALSKI		Manager Name	
Street Address 93 HAZEI STREET		Street Address	
City WOONSOCKET	State RI	City	State
Zip 02895		Zip	
Manager Name		Manager Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 642 - R.I.G.L. 7-16-11			
Agent Name LLOYD R. GARIEPY		Address	
Address 68 CUMBERLAND STREET, SUITE 203		City WOONSOCKET	Zip 02895

This report must be signed in ink by an authorized person pursuant to R.I.G.L. 7-16-66.



* 1 0 2 0 5 5 *

File Date	FILED
Check No.	AUG 16 2004
By:	By M41262
FOR 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 statement contained herein are true and correct.

<i>Daniel T. Landi</i>	8/16/04
Signature of Authorized Person	Date
DANIEL T. LANDI	
Print or Type Name of Authorized Person	