



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

A. Ralph 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

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.

1. ID No. 127269		2. Exact name of the limited liability company TAXPLUS, LLC	
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island TAX SERVICES	
5. Principal office address 112 RESERVOIR AVENUE		City PROVIDENCE	State RI
		Zip 02907	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name ELVIS SENA		Contact Title MANAGER	
Street Address 112 RESERVOIR AVENUE		City PROVIDENCE	State RI
		Zip 02907	
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) <input type="checkbox"/>			
Manager Name ELVIS SENA		Manager Name	
Street Address 112 RESERVOIR AVENUE		Street Address	
City PROVIDENCE	State RI	City	State
Zip 02907		City	State
Manager Name		Manager Name	
Street Address		Street Address	
City	State	City	State
Zip		City	State
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 642 - R.I.G.L. 7-16-11			
Agent Name ELVIS SENA		Address	
Address 112 RESERVOIR AVENUE		City PROVIDENCE	Zip 02907

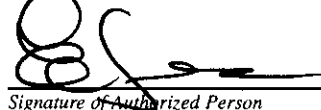
This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

127269

FILED

File Date	OCT 03 2011
Check No.	By MMS 3910
By:	
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 statements, contained herein are true and correct.

 **9/29/2011**
Signature of Authorized Person Date

ELVIS SENA

Print or Type Name of Authorized Person