

Matthew A. Brown, Secretary of State Corporations Division 148 W. River Street, Providence, RI 02904-2615 401.222.3040

## LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR Filing Period: September 1 - November 1 • Filing Fee: \$50.00

	RAVASSOS RE		· · · · · · · · · · · · · · · · · · ·	·	
			e business which is actually conducted in Rhode Island		
5. Principal office address 309 WATERMAN AVENUE			City	State	Zip
309 WATERMAN AV	ENUE		EAST PROVIDENCE	RI	02914-
Contact Name KENNETH TRAVASSOS			Contact Title MEMBER		
Street Address		·	City	State	Zip
309 WATERMAN AVENUE			.EAST PROVIDENCE	RI	02914
Manager Name			• Manager Name		
Street Address			• Street Address		
City	State	Zip	• City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	ZIE
Agent Name		• • •	Address		ω 232
DAVID DIPALMA, E	SQ.				
Address			City		Zip 🚉
138 WARREN AVENUE			EAST PROVIDENCE		02914- = -
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This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).



FILED

AUG 3 1 2012

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.

Signature of Authorized Person

KENNETH TRAVASSOS Print or Type Name of Authorized Person