

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State - Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

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LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2012

Filing Period: September 1 - November 1 - This report must be typed or printed legibly.

Filing Fee: \$50.00 · FAILURE TO FILE THIS REPORT BY DECEMBER 1 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. 161013	UNITED	THE STATE WANCE SERVICES LLC					
3. State of Formation	4. Brief desc SNOW PI	Brief description of the character of business conducted in Rhode Island SNOW PLOWING AND REMOVAL					
5. Principal office address 233 R GEORGE WATERMAN RD			City JOHNSTON	State RI	Zip 02919		
6. MAILING ADDRESS O	F LIMITED LIABILIT	Y COMPANY AND	NAME OF TITLE OF CONTACT P	ERSON:			
Contact Name DONNA INTERLINI			Contact Title OWNER				
Street Address 233 R GEORGE WA	TERMAN RD		City JOHNSTON	State Zip 02	Zip 02919		
7. LIST ALL MANAGERS ("X" BOX FOR ATTAC		RESSES) OF THE	LIMITED LIABILITY COMPANY, IF	APPLICABLE - <u>Do</u>	NOT LIST MEMBERS		
Manager Name	500 mm mm m m m m m m m m m m m m m m m		Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zip 20012		
Manager Name			Manager Name		112 06		
Street Address			Street Address	***			
City	State	Zip	City	State	Zip		
8. RESIDENT AGENT IN					jan ja jar		
This information is curre	ently of record in th	e Office of the Sec	retary of State. Changes require	filing Form 642.			
					5.9		

File Date	FILED	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.		
Check No.	DEC 1 3 2012	Signature of Authorized Person	1/1/2/12	
FOR SECRETARY OF STATE USE ONLY	3760 990	Print or Type Name of Authorized Person		

Form No. 632 Revised: 01/2012