

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

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

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.	2. Exact name of	2. Exact name of the limited liability company				
505497	CARDOSO CONSTRUCTION LLC					
3. State of Formation	4. Brief description of the character of business conducted in Rhode Island					
	CONSTRUCTION					
5. Principal office address 2 DELTA DRIVE	# 26		City PAWTUCKET SHITTLE OF CONTACT PERSO	State RT	Zip 02860	
6. MAILING ADDRESS OF LIMI	(ED)HABILITY C	OMPANY AND NAME (DNI SEE SEE SEE	A TRANSPORTED LEGIS	
Contact Name JAAQUIM CARDOSO			Contact Title DWNLK			
Street Address 72 Charity ST.			City E.P.	State RI	Zip 02 .9 14	
7. LIST ALL MANAGERS (NAM (X. BOX FOR ATTACHMEN	ESANDADDRES	SES TO FT HE MINITED	Delabiliji Companya izad:	LICABLE DO NO	LISTMEMBERS	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zīp	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip 20 Cord	
8 RESIDENT AGENT IN PHODI	The second secon					
This information is currently of	record in the Offi	ice of the Secretary of	State. Changes require filing	Form 642.		
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valodate JAN	Under penalty of perjury, I declare and affirm this report, including any accompanying sch and that all statements contained herein are	edules and statemer
Cited Mis	1012 for U	1-16-13
E /A	Signature of Authorized Person	Date
.ego:es=esTepAiYAOFSAAT;=US=oNey	JOHAUIM CARDOSO	
	Print or Type Name of Authorized Person	

Form No. 632 Revised: 01/2012