

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 2013

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. 98665	2. Exact nar Industria	2. Exact name of the limited liability company Industrial Ventures, LLC				
3. State of Formation	4. Brief desc Real Esta	Brief description of the character of business conducted in Rhode Island Real Estate				
5. Principal office address One James P. Murphy Highway Suite 200			City West Warwick	State RI	Zip 02893	
6. MAILING ADDRESS OF	EMITED LIABILD	Y COMPANY AND N	ame or title of contact pe	RSON: -		
Contact Name Stephen G. Soscia			Contact Title Managing Member			
Street Address One James P. Murphy Highway Suite 200			City West Warwick ,	State RI	Zip 02893	
7. LIST <u>ALL</u> MANAGERS ("X" BOX FOR ATTACK		RESSES) OF THE LI	MITED LIABILITY COMPANY, IF	APPLIC able - <u>Do</u>	NOT LIST MEMBERS	
Manager Name Stephen G. Soscia			Manager Name			
Street Address One James P. Murphy Highway Suite 200			Street Address			
City West Warwick	State RI	Zip 02893	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
8. RESIDENT AGENT IN I	14. 14. 14. 14. 14. 14. 14. 14. 14. 14.					
This information is curre	ntly of record in th	e Office of the Secre	tary of State. Changes require fil	ing Form 642.		

File Date Check No 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.

Signature of Authorized Person

8.16.13

Date

Stephen G. Soscia Managing Member

Print or Type Name of Authorized Person

Form No. 632 Revised: 01/2012