

## 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 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. 110324	2. Exact name of the limited liability company 90 Commercial Street, LLC					
3. State of Formation  Rhode Island				business conducted in Rhode Island cated at 90 Commercial St., Worcester, MA		
5. Principal office address 100 MKL Jr. Blvd			City Worcester	State MA	Zip <b>01608</b>	
6, MAILING ADDRESS OF Contact Name Philip Shwachman	LIMITED LIABILIT	Y COMPANY AND	NAME OR TITLE OF CONTACT I Contact Title	PERSON		
Street Address P.O. Box 646			City Worcester	State MA	Zip 01613-0646	
7. LIST ALL MANAGERS ("X" BOX FOR ATTACH		RESSES) OF THE	LIMITED LIABILITY COMPANY, I	F APPLICABLE - <u>Do</u>	NOT LIST MEMBERS	
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	Zip	
8-HESIDEN AGENTINE		1 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1				
This information is currer	ntly of record in th	e Office of the Sec	retary of State. Changes require	filing Form 642.	August 1	

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 16.	SEP 1 1.2013	Signature of Authorized Person Date
FOR SECRETARY OF STATE USE ONLY	da5]	Philip Shwachman  Print or Type Name of Authorized Person

Form No. 632 Revised: 01/2012