

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.	I	2. Exact name of the limited liability company					
101044	Dubs En	Dubs Enterprises, LLC					
3. State of Formation Rhode Island	4. Brief desc Real Est	Brief description of the character of business conducted in Rhode Island Real Estate					
5. Principal office address 10 Wicasta Farm Road			City Hope Valley	State RI	Zip 02832		
6. MAILING ADDRESS (OF LIMITED LIABILIT	Y COMPANY AND N	AME OR TITLE OF CONTACT P	ERSON:			
Contact Name Roy Dubs		Contact Title Manager					
Street Address 10 Wicasta Farm Road			City Hope Valley	State RI	Zip 02832		
7. LIST <u>ALL</u> MANAGER ("X" BOX FOR ATTAC		RESSES) OF THE LI	MITED LIABILITY COMPANY, IF	APPLICABLE - <u>DO</u>	NOT LIST MEMBERS		
Manager Name Roy Dubs			Manager Name				
Street Address 10 Wicasta Farm Road			Street Address				
City Hope Valley	State RI	Zip 02832	City	State	Zip		
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
8 RESIDENT AGENT IN	RHODE ISLAND						
This information is curre	ently of record in the	Office of the Secret	ary of State. Changes require f	ling Form 642.			

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Form No. 632 Revised: 01/2012

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

Roy Dubs

Print or Type Name of Authorized Person