



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. 126667		2. Exact name of the limited liability company Work 'N Gear, LLC			
3. State of Formation DE		4. Brief description of the character of business conducted in Rhode Island Retail of workwear and healthcare apparel and accessories.			
5. Principal office address 2300 Crown Colony Dr., Ste. 300		City Quincy		State MA	Zip 02169
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name Alexandra Shainskaya		Contact Title Accounting Manager			
Street Address 2300 Crown Colony Dr., Ste. 300		City Quincy		State MA	Zip 02169
7. LIST ALL MANAGERS (NAMES AND ADDRESSES) OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE - DO NOT LIST MEMBERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Manager Name Anthony DiPaolo		Manager Name John McAuliffe			
Street Address 2300 Crown Colony Dr., Ste. 300		Street Address 2300 Crown Colony Dr., Ste. 300			
City Quincy	State MA	Zip 02169	City Quincy	State MA	Zip 02169
Manager Name		Manager Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
8. RESIDENT AGENT IN RHODE ISLAND					
This information is currently of record in the Office of the Secretary of State. Changes require filing Form 642.					

FILED

OCT 24 2013

BY **7183**

File Date _____

Check No. _____

By: _____

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.

Alexandra Shainskaya **10/22/2013**
Signature of Authorized Person Date

Alexandra Shainskaya

Print or Type Name of Authorized Person