RALPH MOIL	tate of Rhode Island and Pro Office of the Secreta		Fee: \$50.00
Division Of Business Services 148 W. River Street Providence RI 02904-2615 (401) 222-3040			
Limited Liability Company Annual Report Filing Period: September 1 - November 1			
In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.			
ANNUAL REPORT YEAR: 2013			
1. ID No. <u>000792622</u>			
2. Exact Name of the Limited Liability Company FIT 2 The CORE /NUTRITIONWORKS LLC			
3. State of Formation			
State: <u>RI</u>			
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island <u>Fitness & Nutrition coaching</u>			
5. Principal Office Address			
No. and Street:993 OAKLAWN AVENUECity or Town:CRANSTONState:RIZip:02920Country:USA			
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
Contact Name:CAMILLE DURANTE Contact Title:OWNERNo. and Street:993 OAKLAWN AVECity or Town:CRANSTONState: RIZip:02920Country:USA			
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS			
Title	Individual Name	Address	
MANAGER	First, Middle, Last, Suffix CAMILLE DURANTE	Address, City or Town, State, Zi 94 CRANBERRY T	ERRACE
MANAGER	CAMILLE DURANTE	CRANSTON, RI 02921 USA CAMILLE DURANTE 94 CRANBERRY TERRACE CRANSTON, RI 02921 UNI	
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11 CAMILLE DURANTE 94 CRANBERRY TERRACE CRANSTON, RI 02921			

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 31 Day of October, 2013 at 7:47:50 PM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By CAMILLE DURANTE

Signature of Authorized Person

Form No. 632 Revised 09/07

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