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## STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State - Division of Business Services

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148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

2013

## LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR

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.

3. State of Formation	Mobile A	deserving Plati	erin ette belgere busines	de Island 5.	
5 Principal office address 20 Promenade Avenue			City Warwick	State	<b>02886</b>
		Y COMPANY AND	NAME OR TITLE OF CONTACT	PERSON	3.2
Contact Name <b>Reginald V. Williams, III</b>			Contact Title <b>Member</b>		
Street Address 203 Promenade Avenue			City Warwick	State RI	Zio <b>U2886</b>
LIST ALL MANAGERS	(NAMES AND ADD	RESSES) OF THE	LIMITED LIABILITY COMPANY,	IF APPLICABLE - <u>DO</u>	NOT LIST MEMBER
Manager Name			Manager Name		
Street Address			Street Address		
Dity	State	Zip	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		<b>28</b> 000 000 000 000 000 000 000 000 000 0
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City	State	Zip	City	State	<b>港</b> 0RA
. RESIDENT AGENT IN R	HODE ISLAND				= = = = = = = = = = = = = = = = = = = =
his information is curren	itly of record in the	Office of the Secr	etary of State. Changes require	filing Form 642.	<b>E</b> 25-70
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		1. A	A. 11:34 A.M.		
File Date			Under penalty of pethis report, including	rjury, I declare and aff	irm that I have examine schedules and stateme
THO DAW				nts conteined herein a	

Signature of Authorized Person Reginald V. Williams, III

Print or Type Name of Authorized Person

Form No. 632 Revised: 01/2012

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