



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. <u>121116</u>		2. Exact name of the limited liability company <u>CORDEIRO'S LANDSCAPING SERVICE, LLC</u>			
3. State of Formation <u>R.I.</u>		4. Brief description of the character of business conducted in Rhode Island <u>LANDSCAPING</u>			
5. Principal office address <u>P.O. BOX 44</u>		City <u>BRISTOL</u>	State <u>R.I.</u>	Zip <u>02809</u>	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name <u>MICHAEL CORDEIRO</u>			Contact Title <u>OWNER</u>		
Street Address <u>661 METACOM AVE UNIT 18</u>			City <u>BRISTOL</u>	State <u>R.I.</u>	Zip <u>02809</u>
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			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. 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

JAN 31 2014

BY 216253

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CORPORATIONS DIV
2014 JAN 31 PM 1:16

File Date	
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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.

MICHAEL CORDEIRO 1-31-14
Signature of Authorized Person Date
MICHAEL CORDEIRO
Print or Type Name of Authorized Person