

## 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. 486193		2. Exact name of the limited liability company NINJA WORLD, LLC				
3. State of Formation RHODE ISLAND		4. Brief description of the character of business conducted in Rhode Island  To engage in the business of wholesale and retail selling of martial art supplies.				
5. Principal office address 2105 Post Road			City <b>Warwick</b>	State <b>RI</b>	Zip 02886	
6. MAILING ADDRESS OF	LIMITED LIABILI	TY COMPANY AND	NAME OR TITLE OF CONTACT	PERSON:		
Contact Name  David Lindsay			Contact Title			
Street Address 2105 Post Road			City <b>Warwick</b>	State RI	Zip <b>02886</b>	
7. LIST <u>ALL</u> MANAGERS ( "X" BOX FOR ATTACH!	NAMES AND ADI	DRESSES) OF THE	LIMITED LIABILITY COMPANY,	IF APPLICABLE - DO	NOT LIST MEMBERS	
Manager Name N/A			Manager Name N/A			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
Manager Name N/A			Manager Name N/A			
Street Address			Street Address			
Dity	State	Zip	City	State	Zip	
B. RESIDENT AGENT IN RH	IODE ISLAND	-:				
This information is current	ly of record in the	Office of the Secr	etary of State, Changes require	filing Form 642		
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FILED

APR 1 7 2014

File Date \_\_\_\_\_

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, implicitly any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Authorized Person

Date

David Lindsay

Print or Type Name of Authorized Person

Form No. 632 Revised: 01/2012