

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 2014

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. 146519	2. Exact name of the limited liability company Marco Photography LLC				
3. State of Formation	Brief description of the character of business conducted in Rhode Island Photography studio				
5. Principal office address 2919 Pawtucket Avenue			City East Providence	State RI	Zip 02915
6. MAILING ADDRESS OF	LIMITED LIABILI	TY COMPANY AND	NAME OF TITLE OF CONTACT PER	SON:	
Contact Name Maria G. Sousa			Contact Title		
Street Address 30 Hazard Avenue			City East Providence	State RI	Zip 02914
/. UST ALL MANAGERS	(NAMES AND ADI	RESSES) OF THE	LIMITED LIABILITY COMPANY, IF A	PPLICABLE - <u>DO</u>	NOTERS AND RES
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
RESIDENT AGENT IN R	HODE ISLAND				
This information is curren	tly of record in the	Office of the Secr	etary of State. Changes require filing	g Form 642.	What is the first way to a second (N.C.).

FILED

SEP 0 5 2014

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

Check No

By:

Signature of Authorized Person

Date

Maria G. Sousa

Print or Type Name of Authorized Person

Form No. 632 Revised: 01/2012