



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. 760941		2. Exact name of the limited liability company SARCIA CAPITAL GROUP LLC			
3. State of Formation RI		4. Brief description of the character of business conducted in Rhode Island REAL ESTATE			
5. Principal office address 16 BALMORAL ST #311		City ANDOVER	State MA	Zip 01810	
6. CONTACT PERSON (LIMITED LIABILITY COMPANY) AND NAME OF TITLE OF CONTACT PERSON					
Contact Name FRANK A. SARCIA JR		Contact Title MANAGER			
Street Address 16 BALMORAL ST #311		City ANDOVER	State MA	Zip 01810	
7. LIST ALL MANAGERS (NAMES AND ADDRESSES) OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE. DO NOT LIST MEMBERS <input type="checkbox"/> FOR ATTACHMENT					
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. FILING AGENT IN RHODE ISLAND					
This information is currently of record in the Office of the Secretary of State. Changes require filing Form 642.					

FILED *ck*

SEP 23 2014

BY *CK # 2222*

File Date: _____
 Office No: _____
 By: _____
 FOR OFFICIAL STATE USE ONLY

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.

Frank A. Sarcia Jr. *9-16-2014*
 Signature of Authorized Person Date

FRANK A SARCIA JR.
 Print or Type Name of Authorized Person