

## 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. 104942		Exact name of the limited liability company     CMM Realty IIc							
3. State of Formation		Brief description of the character of business conducted in Rhode Island     Rental Real Estate							
5. Principal office address 2195 Pawtucket Avenue			City East Providence	Zip <b>02914</b>					
6. MAILING ADDRESS OF Contact Name Carlos M. Martins	zi (Mi) (St) (MAB) (St)	COMPANYAND	NAME OR TITLE OF CONTACT PER Contact Title	SON:	one amount to the control of				
Street Address 2195 Pawtucket Avenue			City East Providence	State RI	Zip <b>02914</b>				
7, LIST ALL MANAGERS ("X" BOX FOR ATTACK	(NAMES AND ADD HMENT)	HESSES) OF THE	LIMITED LIABILITY COMPANY, IF A	PPLICABLE - <u>DO</u>	NOT LIST MEMBERS				
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				F 640					
This information is curre	ntly of record in the	e Office of the Seci	retary of State. Changes require filir	ig Form 642.					

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Form No. 632 Revised: 01/2012 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.

Signature of Authorized Person

Carlos M. Martins

Print or Type Name of Authorized Person