



State of Rhode Island and Providence Plantations  
Office of the Secretary of State

Fee: \$50.00

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

Limited Liability Company  
Annual Report

Filing Period: September 1 - November 1

In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2015

1. ID No. 000702435

2. Exact Name of the Limited Liability Company Sunglass Hut Trading, LLC

3. State of Formation

State: OH

4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island

Operates sun retail store concepts, including Sunglass Hut and Ilori.

5. Principal Office Address

No. and Street: 4000 LUXOTTICA PLACE

City or Town: MASON

State: OH

Zip: 45040

Country: USA

6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:

Contact Name: Contact Title:

No. and Street: 4000 LUXOTTICA PLACE

PO BOX 8509

City or Town: MASON

State: OH

Zip: 45040

Country: USA

7. Name and Address of Each Manager of the Limited Liability Company, if Applicable.

DO NOT LIST MEMBERS

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
MANAGER	JOHN HAUGH	4000 LUXOTTICA PLACE MASON, OH 45040 USA
MANAGER	TRENT RENTFROW	4000 LUXOTTICA PLACE MASON, OH 45040 USA
MANAGER	MICHAEL BOXER	12 HARBOR PARK DR PORT WASHINGTON, NY 11050 USA
MANAGER	VITO GIANNOLA	12 HARBOR PARK DRIVE PORT WASHINGTON, NY 11050 USA

**8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER  
Changes Require Filing of Form 642 - R.I.G.L. 7-16-11**

NATIONAL REGISTERED AGENTS, INC. 450 VETERANS MEMORIAL PARKWAY, SUITE 7A EAST  
PROVIDENCE , RI 02914

**9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).**

**Signed this 19 Day of August, 2015 at 3:43:36 PM by the authorized person.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By MELISSA COOK  
Signature of Authorized Person

Form No. 632  
Revised 09/07

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