

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

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LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2015

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.

1880 Westminster Street Providence RI 0290	1. Entity ID No.		2. Exact name of the limited liability company				
Business Management 5. Principal office address 1880 Westminster Street 6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON: Contact Name Contact Title City State Zip City State	135164	Freeway	/ Enterprises, L	.LC			
Rhode Island 5. Principal office address 1880 Westminster Street 6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON: Contact Name Contact Name Constantinos Perdikakis Street Address 1880 Westminster Street 7. LIST ALL MANAGERS (NAMES AND ADDRESSES) OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE - DO NOT LIST I ("X" BOX FOR ATTACHMENT) Manager Name Manager Name Street Address City State Zip City State Zip Manager Name Street Address City State Zip City State Zip City State Zip Manager Name Street Address City State Zip Manager Name Street Address City State Zip Manager Name Street Address City State Zip Manager Name	3. State of Formation	4. Brief des	Brief description of the character of business conducted in Rhode Island				
1880 Westminster Street Providence RI 0290	Rhode Island						
Contact Name Constantinos Perdikakis Street Address 1880 Westminster Street City Providence City State Ri City Providence City State Do Not List in the city of the Limited Liability Company, if applicable - Do Not List in the city of the Limited Liability Company, if applicable - Do Not List in the city of the city Box For Attachment Manager Name Street Address City State Zip City State Zip Manager Name Street Address City State Zip City State Zip City State Zip B. RESIDENT AGENT IN RHODE ISLAND		Street	.,			Zip	
Contact Title Constantinos Perdikakis Street Address 1880 Westminster Street 7. LIST ALL MANAGERS (NAMES AND ADDRESSES) OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE - DO NOT LIST I ("X" BOX FOR ATTACHMENT) Manager Name Street Address City State Zip City State Zip City Manager Name Street Address Street Address Street Address Street Address City State Zip City State Zip Manager Name Street Address City State Zip City State Zip Street Address City State Zip City State Zip City State Zip Street Address						02908	
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City State Zip City State Zip Manager Name Manager Name Street Address City State Zip City State Zip 8. RESIDENT AGENT IN RHODE ISLAND	Manager Name			Manager Name	2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Washington and the second	
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City State Zip City State Zip 8. RESIDENT AGENT IN RHODE ISLAND	Manager Name			Manager Name			
8. RESIDENT AGENT IN RHODE ISLAND	Street Address			Street Address			
8. RESIDENT AGENT IN RHODE ISLAND							
	City	State	Zip	City	State	Zip	
	B. RESIDENT AGENT IN A	HODE ISLAND					
This information is currently of record in the Office of the Secretary of State. Changes require filing Form 642.	This information is currer	itly of record in th	e Office of the Secr	retary of State. Changes require f	iling Form 642.	Andrew Macrophism Streams (1992)	

FILED

File Date

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.

By:

Signature of Authorized Person

Constantinos Perdikakis

Print or Type Name of Authorized Person

Form No. 632 Revised: 01/2012