

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.

1. Entity ID No. 791420		2. Exact name of the limited liability company UJS Restoration Builders, LLC				
3. State of Formation Rhode Island		4. Brief description of the character of business conducted in Rhode Island Real Estate development				
5. Principal office address 450 Pavilion Avenue			City Warwick	State RI	Zip 02888	
6. MAILING ADDRESS OF	LIMITED LIABILIT	Y COMPANY AND	NAME OF TITLE OF CONTACT	PERSON:		
Contact Name John Buontempo			Contact Title	Contact Title		
Street Address 450 Pavilion Avenue			City Warwick	State RI	Zip 02888	
7. LIST ALL MANAGERS ("X" BOX FOR ATTACH	(NAMES AND ADD IMENT) [RESSES) OF THE	LIMITED LIABILITY COMPANY,	IF APPLICABLE - <u>Do</u>	NOT LIST MEMBERS	
Manager Name			Manager Name			
Street Address			Street Address	Street Address		
City	State	Zip	City	State	Zip	
Manager Name			Manager Name	Manager Name		
Street Address			Street Address			
City	State	Zip	City	State	Zip	
8. RESIDENT AGENT IN R	HODE ISLAND					
This information is currer	ntly of record in th	e Office of the Sec	retary of State. Changes requir	e filing Form 642.		

FILED

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FOR SECRETARY OF 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.

Signature of Authorized Person

· 30 Date

John Buontempo

Print or Type Name of Authorized Person

Form No. 632 Revised: 01/2012