State of Rhode Island and Providence Plantations Fee: Office of the Secretary of State			
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. <u>000506422</u>			
2. Exact Name of the Limited Liability Company CPA Tax & Accounting Service, LLC			
3. State of Formation			
State: <u>RI</u>			
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island <u>Tax Returns and Accounting service</u>			
5. Principal Office Address			
No. and Street: 3945 POST ROAD			
	ARWICK State: RI	Zip: <u>02886</u>	Country: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
Contact Name: MING YU Contact Title:			
No. and Street: <u>394</u>	5 POST ROAD		
City or Town: WA	<u>RWICK</u> State: <u>R</u>	Zip: <u>02886</u>	Country: <u>USA</u>
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS			
Title	Individual Name	Ac	dress
	First, Middle, Last, Suffix	Address, City or Towr	n, State, Zip Code, Country
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11			
MING YU 3945 POST ROAD WARWICK , RI 02886			
9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).			

Signed this 22 Day of December, 2015 at 10:56:56 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 MING YU

Signature of Authorized Person

Form No. 632 Revised 09/07

 $\ensuremath{\textcircled{\sc 0}}$ 2007 - 2015 State of Rhode Island and Providence Plantations All Rights Reserved