

State of Rhode Islam and Providence Plantations

Department of State - Business Services Division

148 W. River Street, Providence, Phode Island 02904-2615

Phone: (401) 222-3040 | Email: corporations@sos.ri.gov | Website: www.sos.ri.gov

Limited Liability Compa	any Annual	Report for t	he year: 20	15		
Filing period: September 1 - N Filing Fee: \$50.00 *FAILURE	lovember 1				IN A \$25 00 DE	- ALALTY FFF
					IN A \$25.00 FE	INALITEE.
1. Entity ID Number	2. Exact name of the Limited Liability Company					
001007462	EAST COAST PrecAST & Rigging LLC					
3. State of Formation	4. Brief description of the character of business conducted in Rhode Island					
21 7 1	Precast concrete erection Zip					
Rhade Island 5. Principal Office Address	I Mec	<u>ast co</u>	ncrete er	ection	and the state of t	
						Zip
1515 Elmwood Ave 6. Mailing Address of Limited Liability Company and Name or Title			CRANSTON	1	RF	02910
Contact Name	Olity Company a	ind Name or Title	of Contact Person Contact Title		THE RESERVE THE PROPERTY OF TH	aliyeri karafari bil din
Jeremy MOSES			President			
Street Address 1515 Elmwood Ave			City Clansti	71/1	State R_T	Zip 02910
7. List ALL managers (names and addresses) of the Limited Liabili			ity Company, IF APF	PLICABLE - D	O NOT LIST ME	MBERS
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	<u> </u>	State	Zip
Manager Name	Manager Name					
Street Address			Street Address			
City	State	Zip	City	· <u> </u>	State	Zip
				Check the	box to indicate ar	attachment
8. Resident Agent in Rhode Island	d This information	s currently of recor	d in the Department of	State Change	s require filing Form	642
Under penalty of perjury, I declar statements, and that all stateme	are and affirm ti ents contained :	hat I have exami herein are true a	ned this report, inc nd correct.	luding any a	ccompanying s	chedules and
Name of Authorized Person					Date	
	· · · · · · · · · · · · · · · · · · ·		5-12-	-16		
Signature of Authorized Person						
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