



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

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2016 JUN 24 AM 9:30

RECEIVED
SECRETARY OF STATE
CORPORATIONS DIV

Limited Liability Company Annual Report for the year: 2015

Filing period: September 1 - November 1

Filing Fee: \$50.00 *FAILURE TO FILE THIS REPORT BY DECEMBER 1 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID Number		2. Exact name of the Limited Liability Company			
126239		WESVARE MIZZENTOP LLC			
3. State of Formation		4. Brief description of the character of business conducted in Rhode Island			
RI		REM ES. BUS.			
5. Principal Office Address		City		State	Zip
30 JOHANSON AVE		NARRAGANSETT		RI	02882
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name		Contact Title			
DAVID SERPA		MANAGER			
Street Address		City		State	Zip
30 OAK ST. #3		CHARLESTOWN		MA	02129
7. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE					
Manager Name		Manager Name		2016 JUN 15 AM 9:30	
Street Address		Street Address		SECRETARY OF STATE CORPORATIONS DIV	
City	State	Zip	City	State	Zip
Manager Name		Manager Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
Check the box to indicate an attachment <input type="checkbox"/>					
8. Resident Agent in Rhode Island This information is currently of record in the Department of State. Changes require filing Form 642.					
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.					
Name of Authorized Person				Date	
DAVID SERPA				5-12-16	
Signature of Authorized Person					

FILED

JUN 24 2016

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