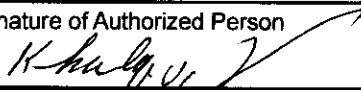State of Rhode Island and Providence Plantations
## Department of State - Business Services Division

## Annual Report for the year: 2016
## Limited Liability Company
→ Filing period: September 1 - November 1
→ Filing Fee: $50.00
→ Penalty: Additional $25.00 fee if form is not filed by December 1.

| 1. Entity ID Number<br>**615170** | 2. Exact name of the Limited Liability Company<br>**IKH, LLC** | | | |
|---|---|---|---|---|
| 3. NAICS Code<br>53 - Real Estate and Rental and | 4. Brief description of the character of business conducted in Rhode Island<br>**REAL ESTATE HOLDING COMPANY** | | | |
| 5. State of Formation<br>**RHODE ISLAND** | | | | |

| 6. Principal Office Address<br>**72 CREST DRIVE** | City<br>**CRANSTON** | State<br>**RI** | Zip<br>**02921** |
|---|---|---|---|

**7. Mailing Address of Limited Liability Company and Name or Title of Contact Person**

| Contact Name **KHALIQ UZZAMAN** | Contact Title **OWNER/PARTNER** | | |
|---|---|---|---|
| Street Address **72 CREST DRIVE** | City **CRANSTON** | State **RI** | Zip **02921** |

**8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS**

| Manager Name | | | Manager Name | | |
|---|---|---|---|---|---|
| Street Address | | | Street Address | | |
| 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 ☐

**9. Resident Agent in Rhode Island.** This information is currently of record with 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<br>**KHALIQ UZZAMAN** | Date<br>**09/16/2016** |
|---|---|

Signature of Authorized Person

*K-huly U. J*

SIGN DOCUMENT HERE

**MAIL TO:**
**Division of Business Services**
148 W. River Street, Providence, Rhode Island 02904-2615
**Phone:** (401) 222-3040
**Website:** www.sos.ri.gov

FILED 02

SEP 21 2016

BY ___ 0213 ___

FORM 632 - Revised: 08/2016