

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

2016 SEP 29 AM 10: 21

Annual Report for the year: 2012 **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	2. Exact r	2. Exact name of the Limited Liability Company				
1298490		Saab Properties LLC				
3. NAICS Code	4. Brief de	4. Brief description of the character of business conducted in Rhode Island				
53	ı	1 i				
5. State of Formation	- 1e	ntal				
RI						
6. Principal Office Address			Me dhe le	State M q	Zip 07.052	
7. Mailing Address of Limited L	iability Comp	any and Name o	or Title of Contact Person			
Contact Name Jell Harson			Contact Title	Contact Title MAA/		
Street Address Po Box (05			city Med Seld	State M A	Zip 02052	
8. List ALL managers (names	and addresse	s) of the Limited	Liability Company, IF APPLICAB	LE - DO NOT LIST !	MEMBERS	
Manager Name			Manager Name			
Street Address			Street Address	Street Address		
City	State	Zip	City	State	Zip	
Manager Name		<u> </u>	Manager Name			
Street Address			Street Address			
City	State	7:-				
	State	Zip	City	State	Zip	
O. Dooidont America Division				Check the box to in	ndicate an attachment	
Index penelty of perferent isla	nd. This inform	ation is currently	of record with the Department of State	. Changes require filing	Form 642.	
	ciare and affi ments contai	rm that I have e ned herein are	examined this report, including true and correct.	any accompanying	schedules and	
Name of Authorized Person Jeff Hanson				Date 9/28/16		
Signature of Authorized Person)	SIGN (DOCUMENT HERE			
			FILED			

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov SEP 29 2016 10:25

BY Le 284596