



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.

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BUS SVCS DIV.
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1. Entity ID Number 891123		2. Exact name of the Limited Liability Company MAJESTY TRANSPORT LLC			
3. NAICS Code 48/49		4. Brief description of the character of business conducted in Rhode Island NON-EMERGENCY MEDICAL TRANSPORTATION			
5. State of Formation RI					
6. Principal Office Address 115 ROANOKE STREET		City PROVIDENCE		State RI	Zip 02908
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name ABDULRAHAMAN AILERY			Contact Title DIRECTOR		
Street Address 115 ROANOKE STREET		City PROVIDENCE		State RI	Zip 02908
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name ABDULRAHAMAN AILERY			Manager Name		
Street Address 115 ROANOKE STREET			Street Address		
City PROVIDENCE	State RI	Zip 02908	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"/>					
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 ABDULRAHAMAN AILERY				Date 10/4/16	
Signature of Authorized Person Abdula					

FILED ✓

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
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