



**State of Rhode Island and Providence Plantations  
Office of the Secretary of State**

Fee: \$50.00

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

**Limited Liability Company  
Annual Report**

*Filing Period: September 1 - November 1*

*In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.*

**ANNUAL REPORT YEAR: 2016**

**1. ID No. 001335829**

**2. Exact Name of the Limited Liability Company Soares Landscape and Hardscape, LLC.**

**3. State of Formation**

State: RI

**ARTICLE III**

Using the following NAICS codes, please select the code that best describes your business.

NAICS Code

6

81

**4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island**

REGULAR LANDSCAPING MAINTENANCE. CUTTING LAWNS, TRIMMING SHRUBS, MULCHING.

**5. Principal Office Address**

No. and Street: 40 HAWTHORNE STREET

City or Town: NORTH PROVIDENCE

State: RI Zip: 02904 Country: USA

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

Contact Name: JOHN SOARES Contact Title:

No. and Street: 40

HAWTHORNE ST.

City or Town: NORTH PROVIDENCE

State: RI Zip: 02904 Country: USA

**7. Name and Address of Each Manager of the Limited Liability Company, if Applicable.  
DO NOT LIST MEMBERS**

Title	Individual Name	Address
MANAGER	KEVIN SOARES	Address, City or Town, State, Zip Code, Country 12 SALEM DRIVE

MANAGER

JOHN SOARES

NORTH PROVIDENCE, RI 02904 USA

40 HAWTHORNE STREET  
NORTH PROVIDENCE, RI 02904 USA

**8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER**  
**Changes Require Filing of Form 642 - R.I.G.L. 7-16-11**

JOHN SOARES 40 HAWTHORNE STREET NORTH PROVIDENCE , RI 02904

**9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).**

**Signed this 21 Day of October, 2016 at 8:37:04 AM by the authorized person. This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.**

By JOHN SOARES  
Signature of Authorized Person

Form No. 632  
Revised 09/07

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