

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

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.** 000791228

- 2. Exact Name of the Limited Liability Company Stylemark, LLC
- 3. State of Formation

State: FL

ARTICLE III

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

NAICS Code

6

423990

Fee: \$50.00

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

WHOLESALE DISTRIBUTION OF NON PRESCRIPTION READING AND SUN GLASSES.

5. Principal Office Address

No. and Street: 500 GEORGE WASHINGTON HIGHWAY

City or Town: SMITHFIELD State: RI Zip: 02917 Country: USA

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

Contact Name: Contact Title:

No. and Street: 13515 N STEMMONS FRWY

City or Town: DALLAS State: TX Zip: 75234 Country: USA

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

Title	Individual Name	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
MANAGER	ANTHONY DIPAOLA	500 GEORGE WASHINGTON HIGHWAY SMITHFIELD, RI 02914 USA
MANAGER	DAVID VANDER SCHAAF	500 GEORGE WASHINGTON HIGHWAY

		SMITHFIELD, RI 02917 USA
MANAGER	DAVID WIELEMANS	500 GEORGE WASHINGTON HWY SMITHFIELD, RI 02917 USA
MANAGER	JEFFREY J GIGUERE	500 GEORGE WASHINGTON HIGHWAY SMITHFIELD, RI 02917 USA
MANAGER	MARK WILLIAMS	500 GEORGE WASHINGTON HIGHWAY SMITHFIELD, RI 02917 USA
MANAGER	LISA GRAY	13515 N. STEMMONS FRWY DALLAS, TX 75234 USA

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

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

Signed this 26 Day of October, 2016 at 4:50:59 PM 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 LISA GRAY

Signature of Authorized Person

Form No. 632 Revised 09/07

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