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. 	

7 Ferranty: Additional \$25.00	iee ii loiiii is ji	ot filed by Decem	iber i.			
1. Entity ID Number	2. Exact name of the Limited Liability Company					
001337291	SUPERIOR PLUMBING RI - LLC					
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island					
23 - Construction	PLUMBING SERVICES					
5. State of Formation						
RI						
3. Principal Office Address			City	State	Zip	
52 STEVENS ROAD	TEVENS ROAD			RI	02910	
7. Mailing Address of Limited Lia	bility Company	and Name or Title	of Contact Person	•		
Contact Name MICHAEL RUGGIERO			Contact Title SOLE MEMBER			
Street Address 52 STEVENS ROAD			City CRANSTON	State RI	^{Zip} 02910	
8. List ALL managers (names ar	id addresses) of	f the Limited Liabi	lity Company, IF APPLICABLE	- DO NOT LIST ME	MBERS	
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 inc	licate 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 dec statements, and that all statem	lare and affirm ents contained	that I have exam I herein are true	nined this report, including a and correct.	ny accompanying	schedules and	
Name of Authorized Person				Date	Date	
MICHAEL RUGGIERO				10/13/16		
Signature of Authorized Person SIGN DOCUMENT HTRE						

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 D

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