



State of Rhode Island and Providence Plantations

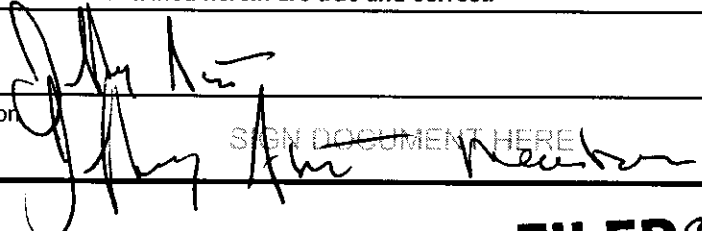
Department of State - Business Services Division

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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.

1. Entity ID Number 149717		2. Exact name of the Limited Liability Company MOAP ENTERPRISES, LLC			
3. NAICS Code 53		4. Brief description of the character of business conducted in Rhode Island TO PROVIDE PROPERTY MANAGEMNET AND GENERAL CONSTRUCTION SERVICES			
5. State of Formation RI					
6. Principal Office Address PO BOX 252		City WYOMING		State RI	Zip 02898
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name JEFFREY APTT			Contact Title MEMBER		
Street Address PO BOX 252		City WYOMING		State RI	Zip 02898
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
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 indicate 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 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 JEFFREY APTT-MEMBER				Date 10/29/2016	
Signature of Authorized Person 					

FILED

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BY CK 529

MAIL TO:

Division of Business Services

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

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Website: www.sos.ri.gov