



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

2016 DEC 15 PM 3:13

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R.I. DEPT. OF STATE
BUS. SVCS. DIV.

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 <u>921438</u>		2. Exact name of the Limited Liability Company <u>Vasquez Distributors, LLC</u>	
3. NAICS Code <u>72</u>		4. Brief description of the character of business conducted in Rhode Island <u>Delivery of bare goods to</u> <u>various establishments</u>	
5. State of Formation <u>RI</u>			
6. Principal Office Address <u>194 Cross St. #2</u>		City <u>Central Falls</u>	State <u>RI</u>
		Zip <u>02863</u>	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person <u>Same as above</u>			
Contact Name <u>Pedro Vasquez</u>		Contact Title <u>Same as above</u>	
Street Address <u>Same as above</u>		City <u>—</u>	State <u>—</u>
		Zip <u>—</u>	
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS			
Manager Name <u>P/A</u>		Manager Name <u>/</u>	
Street Address <u>/</u>		Street Address <u>/</u>	
City <u>/</u>	State <u>/</u>	City <u>/</u>	State <u>/</u>
Zip <u>/</u>		Zip <u>/</u>	
Manager Name <u>/</u>		Manager Name <u>/</u>	
Street Address <u>/</u>		Street Address <u>/</u>	
City <u>/</u>	State <u>/</u>	City <u>/</u>	State <u>/</u>
Zip <u>/</u>		Zip <u>/</u>	
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 <u>[Signature]</u>		Date <u>12/15/16</u>	
Signature of Authorized Person <u>[Signature]</u>		SIGN DOCUMENT HERE	

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040

Website: www.sos.ri.gov

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