



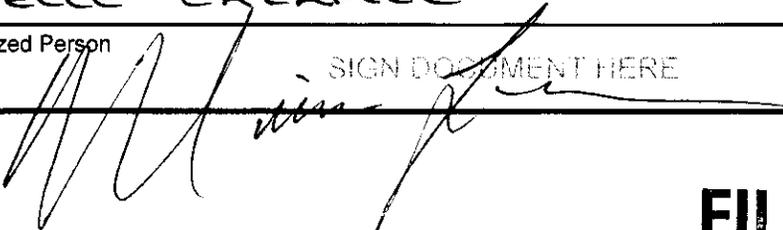
State of Rhode Island and Providence Plantations
Department of State - Business Services Division

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

Annual Report for the year: 2016
Limited Liability Company

2017 JAN -4 AM 11:19

- 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 163048		2. Exact name of the Limited Liability Company MAL MANAGEMENT GROUP, LLC					
3. NAICS Code 31-33 - Manufacturing		4. Brief description of the character of business conducted in Rhode Island OEM CUSTOM DISTRIBUTOR					
5. State of Formation RHODE ISLAND							
6. Principal Office Address 10 ROGLER FARM ROAD				City SMITHFIELD		State RI	Zip 02917
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person							
Contact Name MICHELLE LARAMEE				Contact Title MEMBER			
Street Address 10 ROGLER FARM ROAD				City SMITHFIELD		State RI	Zip 02917
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 <input type="checkbox"/>							
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 MICHELLE LARAMEE						Date 12/16/16	
Signature of Authorized Person 						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

FILED ←

JAN 04 2017

BY Ca 292272