



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: 2017
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.

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 BUS SVCS DIV
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1. Entity ID Number <u>000528270</u>		2. Exact name of the Limited Liability Company <u>Tung Family Enterprises, LLC</u>	
3. NAICS Code <u>53</u> <input checked="" type="checkbox"/>		4. Brief description of the character of business conducted in Rhode Island <u>OWN & Lease Real Estate</u>	
5. State of Formation <u>Re</u>			
6. Principal Office Address <u>3 Birchview Drive</u>		City <u>Cranston</u>	State <u>Re</u> Zip <u>02920</u>
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name <u>Yat Sau Tung</u>		Contact Title	
Street Address <u>3 Birchview Drive</u>		City <u>Cranston</u>	State <u>Re</u> Zip <u>02920</u>
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
Manager Name		Manager Name	
Street Address		Street Address	
City	State	Zip	City
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 <u>YAT SAU YUNG</u>		Date <u>6-14-17</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

FILED

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BY

[Signature]

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