



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

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2017 NOV 22 PM 3:37

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.

1. Entity ID Number <u>000507621</u>		2. Exact name of the Limited Liability Company <u>Angela K. Sharkey, LLC</u>			
3. NAICS Code <u>531110</u>		4. Brief description of the character of business conducted in Rhode Island <u>Korean language interpreter & real estate service.</u>			
5. State of Formation <u>RI</u>					
6. Principal Office Address <u>PO Box 515</u>			City <u>West Kingston</u>	State <u>RI</u>	Zip <u>02892</u>
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name <u>Angela K. Sharkey</u>			Contact Title <u>President</u>		
Street Address <u>SAME AS ABOVE</u>			City	State	Zip
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 <u>Angela K. Sharkey</u>				Date <u>Nov 22 - 2017</u>	
Signature of Authorized Person					

FILED

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MAIL TO:
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