RI SOS Filing Number: 201855678590 Date: 1/5/2018 4:00:00 PM

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: 20 / 7
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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1, Entity ID Number	2. Exact name of the Limited Liability Company					
877.142	PAB Enterprises, LLC					
3. State of Formation	4. Brief description of the character of business conducted in Rhode Island					
RI rental property company (531110)						
$R \setminus R$	RI Conpany (551110)					
11 1 40 Carpor						
5. Principal Office Address			City	State	Zip	
27 Libera St			Cranston	, RI	02920	
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person						
comaciname Carpention			Contact Title President			
Street Address Rome Dr			city ranston	Stay	Zip 02921	
7. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS						
Mananer Name ~ -			Manager Name			
Street Address			Street Address			
Qitv I	Stam .	7in _ •	Cityi	Stat	Zip ,	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
Check the box to indicate an attachment						
8. Resident Agent in Rhode Island. This information is currently of record in 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 Date						
Peter J (a	אפי	12/29/17				
Signature of Authorized Person / SIGN DOCUMENT HEDE						
Feel Cersonifum SIGN DOCUMENT HERE						

FILED

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov JAN 0 5 2018

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