

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

2010 JAN 23 PM 2: 23

Annual Report for the year: 201Limited 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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Entity ID Number	2. Exact name of the Limited Liability Company				
1337131	HOGHESS ASSETS LLC				
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island				
531390	4. Brief description of the character of business conducted in Rhode Island, folking Company to By and Sell Keal Estate				
5. State of Formation] (/			
RI					
6. Principal Office Address			City	State	Zip
89 Home Ave			Poudence	KI	02908
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Lus ROSA			Contact Title CWNCK		
Street Address 39 Hane Ave			City Pracdunce	State	zip02908
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name OSC LOIS ROSA			Manager Name		
Street Address Home Ave			Street Address		
City Kardenee	State	Zip 0 Z908	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Check the box to indicate an attachme					
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				Date	7 /
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Signature of Authorized Person					
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MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov 2:24 pm

JAN 23 2018

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BY 322464

FORM 632 - Revised: 08/2016