

RECEIVED SECRETARY OF STATE

2010 JAN 25 AM 11: 45

Annual Report for the year: **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 D & D Home & Industrial Services UC				
	3. NAICS Code	Brief description of the character of business conducted in Rhode Island				
$1 \rightarrow 38 \rightarrow 0$						
	5. State of Formation General Contracting					
	5. State of Formation	Ger	KIAL (omaching		
	i. Principal Office Address			City	State	Zip
	Sa wonder fult hund			Mish Rudna	KT	CD911
	7. Mailing Address of Nimited Liability Company and Name or Title of Contact Person					
	Contact Name			Contact Title		
	Street Address Sq. Warna Sun Fritt Me			West Provide	State	zio USG 11
*	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
		•	•	Che	eck the box to ind	icate an attachment
	9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 642.					
	nder penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and atements, and that all statements contained herein are true and correct.					
	Name of Authorized Person		Date 1			
Signature of Authorized Person						
		-				

MAIL TO:

Division of Business Services

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

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

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