



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

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CORPORATIONS DIV

2018 MAY 29 PM 2:35

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>15943A</u>		2. Exact name of the Limited Liability Company <u>Wheeler Ave LLC</u>			
3. NAICS Code <u>424610</u>		4. Brief description of the character of business conducted in Rhode Island <u>Distributor of BOPP + PET film in Roll form.</u> <u>For the graphic Art Industry</u>			
5. State of Formation <u>RI</u>					
6. Principal Office Address <u>999 Pontiac Ave</u>		City <u>Cranston</u>		State <u>RI</u>	Zip <u>02920</u>
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name <u>Michael O'Connor</u>		Contact Title <u>Partner</u>			
Street Address <u>999 Pontiac Ave</u>		City <u>Cranston</u>		State <u>RI</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	City	State	Zip	
Manager Name		Manager Name			
Street Address		Street Address			
City	State	City	State	Zip	
Check the box to indicate an attachment ☐					
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>Michael O'Connor</u>				Date <u>5/29/2018</u>	
Signature of Authorized Person <u>[Signature]</u>				SIGN DOCUMENT HERE	

FILED

MAY 29 2018

BY 331503
A.A.

MAIL TO:
Division of Business Services
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Website: www.sos.ri.gov