

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

RECEIVED SECRETARY OF STATE CORPORATIONS DIV

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Annual Report for the year: 2018**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.

4.5	T		<u> </u>	<u> </u>	
Entity ID Number	2. Exact name of the Limited Liability Company				
001666159	MR HOME REPAIRS ILC				
3. NAICS Code	Brief description of the character of business conducted in Rhode Island				
234118	CONICTOUCT				
5. State of Formation	CONSTRUCTION				
1,					
Massachusetts					
6. Principal Office Address			City	State	Zip
21 Amps St APT#2			Brockton	$ n_A $	02301
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Seawo			Contact Title ()WNEY		
Street Address / PL AMES ST APT#19			Ryochdon	State NA	21p 02301
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name Maria Rosa Cela			Manager Name		
Street Address 21 Amp 5			Street Address		
Brockton Manager Name	State IM A	Zip 09307	City	State	Zıp
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
				Check the box to i	ndicate 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 Date					
Secreto Simbaina 177/18					
Signature of Authorized Person					
(Segf Max)					

MAIL TO:

Division of Business Services

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