s s	tate of Rhode Island and Pro Office of the Secreta		5 Fee: \$50.00
	Division Of Business 148 W. River S Providence RI 0290	treet	
HOPE	(401) 222-304		
Limited Liability Company Annual Report Filing Period: September 1 - November 1			
In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.			
ANNUAL REPORT YEAR: 2018			
1. ID No. <u>001677911</u>			
2. Exact Name of the Limited Liability Company Minasalli Cabinet & Countertop LLC.			
3. State of Formation			
State: <u>NH</u>			
ARTICLE III			
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.			
<u>238390</u>			
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island			
SALES AND INSTALLATION OF CABINETS AND COUNTERTOPS.			
5. Principal Office Addre	SS		
	6 HAZEL DR AMPSTEAD State: <u>NH</u>	Zip: <u>03841</u> Co	ountry: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
Contact Name: <u>JARRET MINASALLI</u> Contact Title: <u>PRESIDENT</u> No. and Street: <u>16 HAZEL DR</u>			
City or Town:	MPSTEAD State: NH	Zip: <u>03841</u> Co	ountry: <u>USA</u>
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS			
Title	Individual Name	Addres	
MANAGER	First, Middle, Last, Suffix JARRET CHARLES MINASALLI	Address, City or Town, Sta	
MANAGER	CHARLES JOHN MINASALLI	WINDHAM, NH C	3087 USA
		14 EPPI	NG AVE

8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

LEGALINC CORPORATE SERVICES INC. 222 JEFFERSON BOULEVARD, SUITE 200 WARWICK , RI 02888

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 8 Day of August, 2018 at 9:24:38 PM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By JARRET MINASALLI

Signature of Authorized Person

Form No. 632 Revised 09/07

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