



State of Rhode Island and Providence Plantations

## Department of State - Business Services Division

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.

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 SECRETARY OF STATE  
 CORPORATIONS DIV  
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1. Entity ID Number <b>486822</b>		2. Exact name of the Limited Liability Company <b>mycabinetonline LLC</b>	
3. NAICS Code <b>454110</b>		4. Brief description of the character of business conducted in Rhode Island <b>sales of Kitchen cabinets</b>	
5. State of Formation <b>RI</b>			
6. Principal Office Address <b>24 Ballou Ave</b>		City <b>Lincoln</b>	State <b>RI</b>
Zip <b>02865</b>			
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name <b>Donna Ferrante</b>		Contact Title <b>member</b>	
Street Address <b>SAME AS ABOVE</b>		City	State
		Zip	
8. List ALL managers (names and addresses) of the Limited Liability Company. IF APPLICABLE - DO NOT LIST MEMBERS			
Manager Name <b>Donna Ferrante</b>		Manager Name	
Street Address <b>SAME</b>		Street Address	
City	State	Zip	
City	State	Zip	
Manager Name		Manager Name	
Street Address		Street Address	
City	State	Zip	
City	State	Zip	
Check the box to indicate an attachment <input type="checkbox"/>			
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 <b>Donna Ferrante</b>		Date <b>8/23/18</b>	
Signature of Authorized Person <b>Donna Ferrante</b>			

## 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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