

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

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.

1. Entity ID Number 000736953		2. Exact name of the Limited Liability Company SANOIL LLC				
3. NAICS Code	4. Brief desc	4. Brief description of the character of business conducted in Rhode Island				
454310	Sale of oil a	Sale of oil and petroleum products				
5. State of Formation						
Rhode Island						
6. Principal Office Address			City	State	Zıp	
101 Corliss St.			Providence	Ri	02904	
7. Mailing Address of Limited	Liability Compan	y and Name or Tit	lle of Contact Person	<u></u>		
Contact Name Guido R. Salvadore			Contact Tille Registered Agent			
Street Address 10 Weybosset St., Suite 303			City Providence	State RI	^{Zip} 02903	
		of the Limited Lia	bility Company IF APPLICAE	BLE - DO NOT LIST	MEMBERS	
Manager Name John C. Santoro			Manager Name			
Street Address 101 Corliss St.			Street Address			
City Providence	State RI	Zip 02904	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zıp	
				Check the box to	indicate an attachment	
9. Resident Agent in Rhode I	sland. This informa	ation is currently of re	ecord with the Department of Sta	ite. Changes require filir	ng Form 642.	
Under penalty of perjury, I statements, and that all sta	declare and affir ntements contain	m that I have exa led herein are tru	mined this report, including and correct.	g any accompanyin	g schedules and A	
Name of Authorized Person		-	, <u></u>	Date		
John C. Santoro, Manager	6			1 8/2	22/201 -	
Signature of Authorized Pers		P .	11 1 (A. 1.) A. 1. (A. 1.)	t	i	

MAIL TO:

Division of Business Services

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

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