State of Rhode Island and Providence Plantations Department of State - Business Services Division	
Annual Report for the year: 2018 Limited Liability Company	STA Inc.
→ 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	2. Exact name of the Limited Liability Company						
137347	ANTINUCCI ENTERPRISES, LLC						
3. NAICS Code 323	4. Brief description of the character of business conducted in Rhode Island						
ainment, and R	,,,,,,,,,,						
5. State of Formation	photographs						
Rhode Island							
6. Principal Office Address			City	State	Zip		
362 Broadway			Providence	RI	02909		
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person							
Contact Name Janice D. Antinucci		Contact Title Member					
Street Address 650 Rock Gove Lane 155 Co flor wood Dr.			^{City} Severna Park	State MD	^{Zip} 21146		
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	Zip	City	State	Zip		
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
		<u> </u>		Check the box to in	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	· .		
Janice D. Antinucci				9-1-18			
Signature of Authorized Person SIGN DOCUMENT HERE							
SIGN DOCUMENT HERE							

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov FILED SEP 10 2018
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