



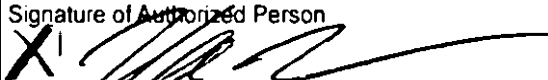
State of Rhode Island and Providence Plantations
Department of State - Business Services Division

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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.

1. Entity ID Number 791937	2. Exact name of the Limited Liability Company 382 COLLISION CENTER LLC		
3. NAICS Code 811111	4. Brief description of the character of business conducted in Rhode Island AUTO BODY REPAIR		
5. State of Formation RHODE ISLAND			
6. Principal Office Address 382 PAWTUCKET AVENUE		City PAWTUCKET	State RI
		Zip 02860	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name JOSEPH RAHEB		Contact Title ATTORNEY	
Street Address 650 WASHINGTON HWY., SUITE 200		City LINCOLN	State RI
		Zip 02865	
8. List ALL managers (names and addresses) of the Limited Liability Company. IF APPLICABLE - DO NOT LIST MEMBERS			
Manager Name NONE		Manager Name	
Street Address		Street Address	
City	State	Zip	City
Manager Name		Manager Name	
Street Address		Street Address	
City	State	Zip	City
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 MISSAK S. NADJARIAN			Date 8/20/18
Signature of Authorized Person 		SIGN DOCUMENT HERE	

FILED

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BY CK CK# 3967

MAIL TO:
 Division of Business Services
 148 W River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040
 Website: www.sos.ri.gov