



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

STAMP

FOR
 SECRETARY OF STATE
 USE ONLY

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 001671083		2. Exact name of the Limited Liability Company Soares Family, LLC			
3. NAICS Code 531110		4. Brief description of the character of business conducted in Rhode Island Lessor of residential buildings			
5. State of Formation RI					
6. Principal Office Address 125 Arlington Street		City East Providence	State RI	Zip 02914	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Paul Soares			Contact Title Manager		
Street Address 125 Arlington Street		City East Providence	State RI	Zip 02914	
8. List ALL managers (names and addresses) of the Limited Liability Company. IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name Paul Soares		Manager Name			
Street Address 125 Arlington Street		Street Address			
City East Providence	State RI	Zip 02914	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 Paul Soares				Date 9-11-18	
Signature of Authorized Person <i>Paul Soares</i>		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 14 2018
 BY 280