



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

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SECRETARY OF STATE
CORPORATIONS DIV

Annual Report for the year: 2018
Limited Liability Company

2018 SEP 19 AM 10:47

- 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 714 722		2. Exact name of the Limited Liability Company CROSS CULTURE INTERPRETATION AND TRANSLATION SERVICES LLC			
3. NAICS Code 541930		4. Brief description of the character of business conducted in Rhode Island INTERPRETATION AND TRANSLATION SERVICES			
5. State of Formation RHODE ISLAND					
6. Principal Office Address 8 ACORN STREET		City CUMBERLAND		State RI	Zip 02864
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name JOCELYN LAU			Contact Title DIRECTOR		
Street Address 8 ACORN STREET			City CUMBERLAND		State RI Zip 02864
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
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 JOCELYN LAU				Date 9/19/2018	
Signature of Authorized Person <i>Joe Ngy Lau</i>					

MAIL TO:
Division of Business Services
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