



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

**FILED**

OCT 22 2018

BY

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 <b>542514</b>		2. Exact name of the Limited Liability Company <b>RICON CONTRACTING, LLC</b>			
3. NAICS Code <b>812990</b>		4. Brief description of the character of business conducted in Rhode Island <i>Contracting. Construction, millwork, handyman</i>			
5. State of Formation <b>Rhode Island</b>					
6. Principal Office Address <b>284 Phenix Avenue</b>			City <b>Cranston</b>	State <b>RI</b>	Zip <b>02920</b>
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name <b>Louis Paiva</b>			Contact Title <b>Member</b>		
Street Address <b>284 Phenix Avenue</b>			City <b>Cranston</b>	State <b>RI</b>	Zip <b>02920</b>
8. List ALL managers (names and addresses) of the Limited Liability Company. IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name <b>None</b>			Manager Name <b>None</b>		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Manager Name <b>None</b>			Manager Name <b>None</b>		
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.					
<b>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.</b>					
Name of Authorized Person <b>Louis Paiva</b>				Date <b>10/19/2018</b>	
Signature of Authorized Person <i>[Signature]</i>				SIGN DOCUMENT HERE	

**MAIL TO:**

Division of Business Services  
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