

STAMP

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.

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1. Entity ID Number 792716	I	2. Exact name of the Limited Liability Company SJK Plus Holdings, LLC					
3. NAICS Code	4. Brief de:	Brief description of the character of business conducted in Rhode Island					
531311	To own	To own, develop, lease and sell real estate					
5. State of Formation							
RHODE ISLAND							
6. Principal Office Address	•		City	State	Zip		
8 Ridgewood Road		Cranston	RI	02813			
7. Mailing Address of Limite	ed Liability Compa	any and Name or	Title of Contact Person				
Contact Name Joseph Loberti			Contact Title Member				
Street Address P.O. Box 1255			City Charlestown	State RI	Zip . 02813		
8. List ALL managers (nam	es and addresse	s) of the Limited	Liability Company, IF APPLICABLE	- DO NOT LIST I	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		
	l	1	(Check the box to i	ndicate an attachment		
9. Resident Agent in Rhode	e Island. This inform	mation is currently	of record with the Department of State. C	Changes require filir	ng Form 642.		
Under penalty of perjury, statements, and that all s			examined this report, including a true and correct.	ny accompanyin	g schedules and		
Name of Authorized Persor	ì	,		Date)		
Joseph Loberti	1	•		11111	<u> </u>		
Signature of Authorized Pe	rson	\$IG	N DOCUMENT HERE	— / j			
Signature of Authorized Pe		\$iG	N 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

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