



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

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CORPORATIONS DIV

2019 APR -2 PM 1:46

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 <u>001670644</u>		2. Exact name of the Limited Liability Company <u>M2TO IMPROVEMENT LLC</u>			
3. NAICS Code <u>999999</u>		4. Brief description of the character of business conducted in Rhode Island <u>CONSTRUCTION</u>			
5. State of Formation <u>RI</u>					
6. Principal Office Address <u>51 ATLANTIC AVE APT 1</u>			City <u>PROVIDENCE</u>	State <u>RI</u>	Zip <u>02905</u>
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name <u>EVARITO ROSSARIO</u>			Contact Title		
Street Address <u>71 STEUBEN ST</u>			City <u>PROVIDENCE</u>	State <u>RI</u>	Zip <u>02909</u>
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 <u>Miguel A. Rosario</u>				Date <u>4/02/2018</u>	
Signature of Authorized Person <u>Miguel A. Rosario</u>					

FILED

MAIL TO:
Division of Business Services
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Website: www.sos.ri.gov

APR 02 2019
BY A. GWQIN