



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

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CORPORATIONS DIV

2019 APR 10 PM 3:41

Annual Report for the year: 2019
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>1683839</u>		2. Exact name of the Limited Liability Company <u>Premier Construction and remodeling service LLC</u>			
3. NAICS Code <u>236118</u>		4. Brief description of the character of business conducted in Rhode Island <u>remodeling.</u>			
5. State of Formation <u>R.I.</u>					
6. Principal Office Address <u>10 ambrose st.</u>		City <u>North Providence</u>		State <u>R.I.</u>	Zip <u>02904</u>
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name <u>Elder Ramos</u>			Contact Title		
Street Address <u>10 ambrose st.</u>			City <u>North Providence</u>	State <u>R.I.</u>	Zip <u>02904</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>Elder Ramos</u>				Date <u>04/10/19</u>	
Signature of Authorized Person <u>[Signature]</u>					

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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