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R.I. DEPT. OF STATE  
BUS SVCS DIVState of Rhode Island and Providence Plantations  
Department of State - Business Services Division

2019 AUG 26 A 11:49

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>00517403</u>		2. Exact name of the Limited Liability Company <u>MAZASU LLC</u>	
3. NAICS Code <u>531210</u>		4. Brief description of the character of business conducted in Rhode Island <u>Rental and Sale Own Real Estate</u>	
5. State of Formation <u>RI</u>			
6. Principal Office Address <u>177 Arnold Dr</u>		City <u>Cranston</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>Jorge Heryaime</u>		Contact Title	
Street Address <u>177 Arnold Dr</u>		City <u>Cranston</u>	State <u>RI</u>
		Zip <u>02905</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
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>Jorge Heryaime</u>		Date <u>8/26/19</u>	
Signature of Authorized Person 			

Check the box to indicate an attachment ☐

## MAIL TO:

Division of Business Services  
148 W. River Street, Providence, Rhode Island 02904-2615  
Phone: (401) 222-3040  
Website: www.sos.ri.gov

FILED

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BY

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