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State of Rhode Island and Providence Plantations

Department of State - Business Services Division

2019 AUG 26 P 2:30

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>95267</u>		2. Exact name of the Limited Liability Company <u>unproven Ventures L.L.C</u>	
3. NAICS Code <u>236117</u>		4. Brief description of the character of business conducted in Rhode Island <u>Realstate Delapment</u>	
5. State of Formation <u>RI</u>			
6. Principal Office Address <u>240 George W. Sherman Rd</u>		City <u>Johnston</u>	State <u>RI</u>
		Zip <u>02919</u>	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name <u>Mike Masucci</u>		Contact Title <u>member</u>	
Street Address <u>Same</u>		City	State
		Zip	
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>Michael J. Masucci Jr.</u>		Date <u>8-26-2019</u>	
Signature of Authorized Person 			

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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