

Annual Report for the year: 2019 **Limited Liability Company** 

- → Filing period. September 1 November 1→ Filing Fee: \$50.00

→ Penalty: Additional \$2	25.00 fee if form	is not filed by De	ecember 1.	_		
1 Entity ID Number 000713018		2 Exact name of the Limited Liability Company 181 WILLET AVENUE, LLC.				
3. NAICS Code	4. Brief des	Brief description of the character of business conducted in Rhode Island				
513320	REAL ES	REAL ESTATE				
5. State of Formation						
RI						
6 Principal Office Address			City	State	Zip	
181 WILLET AVENUE			East Providence	RI	02915	
7. Mailing Address of Limite		any and Name or		<del>-</del>		
Contact Name Julia Huang			Contact Title President			
Street Address 181 Willet Avenue			City East Providence	State RI	<sup>Zip</sup> 02915	
8. List ALL managers (nam	es and addresse:	s) of the Limited	Liability Company, IF APPLICABLE	- DO NOT LIST	MEMBERS	
Manager Name			Manager Name	Manager Name		
Street Address			Street Address			
City	State	Zip	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zıp	City	State	Zip	
<del>-</del>		•	(	Check the box to	indicate an attachment	
9. Resident Agent in Rhode	Island. This inform	nation is currently	of record with the Department of State (	Changes require filir	ng Form 642	
Under penalty of perjury, statements, and that all st			examined this report, including a true and correct.	ny accompanyin	g schedules and	
Name of Authorized Person				Date		
Julia Huang						
Signature of Authorized Per	rson TNW	SIGN	I 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 **FILED** 

STAL P

OCT 2 4 2019