



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

FILED

OCT 28 2019

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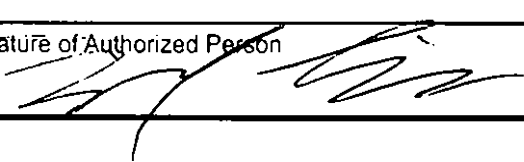
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STARTAnnual Report for the year: **2019**

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 118631		2. Exact name of the Limited Liability Company MICHAEL LUCIA, LLC			
3. NAICS Code 488410		4. Brief description of the character of business conducted in Rhode Island Towing			
5. State of Formation Rhode Island					
6. Principal Office Address 21 Vermont Street		City Johnston		State RI	Zip 02919
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Michael P. Lucia			Contact Title		
Street Address 21 Vermont Street		City Johnston		State RI	Zip 02919
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.					
<i>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.</i>					
Name of Authorized Person Michael P. Lucia				Date 10-25-19	
Signature of Authorized Person 					

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040

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