RI SOS Filing Number: 201926905080 Date: 11/4/2019 4:00:00 PM



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

FILED

NOV **04 2019**

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	2. Exact name of the Limited Liability Company					
962168	CAP-POOL, LLC					
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island					
531390	To own real estate and property.					
5. State of Formation	1					
RI						
6. Principal Office Address			City	State	Zip	
535 Atwood Avenue			Cranston	RI	02920	
7. Mailing Address of Limited Lia	bility Compa	ny and Name or Tit				
Contact Name Jack Capuano			Contact Title Member			
Street Address 535 Atwood Ave.,c/o Messina/Golato CPAs			City Cranston	State RI	^{Zip} 02920	
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	Zîp	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
Check the box to indicate an attachment						
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 dec statements, and that all staten	lare and affi nents contai	irm that I have exa ned herein are tru	mined this report, includi e and correct.	ing any accompanying	schedules and	
Name of Authorized Person				Date	Date	
Jack Capuano				9/12/201	9	
Signature of Authorized Person SIGN 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