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					
1061499	Providence Coach & Cab Services, LLC					
3. NAICS Code	Brief description of the character of business conducted in Rhode Island Limousine services.					
485320						
5. State of Formation			•			
Rhode Island						
6. Principal Office Address			City		State	Zıp
1187 Danielson Pike			North Scituate		RI	02857
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person						
Contact Name Edward Raso			Centact 7 tle Member			
Street Address 1187 Danielson Pike			City North Scituate	<u> </u>	State RI	⁷ 10 0285 7
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS						
Manager Name None			Manager Name			
Street Address			Street Address			
City	State	Zip	City	i	State	Zıp
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City		State	Z·p
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 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 Date						
Edward Raso 10-17-19						
Signature of Authorized Person Sich Line						

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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01/RMA22 - Revised: 10/2017