RI SOS Filing Number: 201927371730 Date: 11/13/2019 9:01:00 AM



State of Rhode Island and Providence Plantations

## **Department of State - Business Services Division**

RECEIVED SECRETARY OF STATE CORPORATIONS DIV

2019 NOV 13 AM 8: 59

## 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 001657874	2. Exact name of the Limited Liability Company  Mike's Drywall LLC					
3. NAICS Code 238300	Brief description of the character of business conducted in Rhode Island     Installation of Sheetrocks					
5. State of Formation Rhode Island						
6. Principal Office Address			City	State	Zip	
75 Bellevue Ave			Providence	RI	02907	
7. Mailing Address of Limited Lia	ability Compa	iny and Name or	Title of Contact Person	I	<del>_</del> _	
Contact Name Lucas M Rosales			Contact Title President			
Street Address 75 Bellevue Ave			<sup>City</sup> Providence	State RI	<sup>Zip</sup> 02907	
8. List ALL managers (names a	nd addresses	s) of the Limited	Liability Company, IF APPLICAL	BLE - DO NOT LIST	MEMBERS	
Manager Name			Manager Name	Manager Name		
Stree: Address			Street Address			
City	State	Zip	City	State	Zip	
Manager Name		<u> </u>	Manager Name			
Street Address			Street Accress			
City	State	Zip	City	State	Zip	
			<u> </u>	Check the box to	indicate an attachment	
9. Resident Agent in Rhode Islan	nd. This inform	nation is currently o	of record with the Department of Sta	atc. Changes require filir	ng Form 642.	
Under penalty of perjury, I dec statements, and that all states	lare and affi nents contai	irm that I have o ined herein are	examined this report, includin true and correct.	ig any accompanyin	g schedules and	
Name of Authorized Person				Date	Date	
Lucas M Rosales				11/13/2	11/13/2019	
Signature of Authorized Person		Au	15 8 15 KI	· · · · · · · · · · · · · · · · · · ·		

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 C

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FORM 632 - Revised: 10/2017