



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

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.

FILED

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FOR THE DEPARTMENT OF STATE
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1. Entity ID Number 534945		2. Exact name of the Limited Liability Company DRM, LLC					
3. NAICS Code 441120		4. Brief description of the character of business conducted in Rhode Island USED CAR DEALERSHIP					
5. State of Formation RI							
6. Principal Office Address 411 DOUGLAS PIKE				City SMITHFIELD		State RI	Zip 02917
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person							
Contact Name DANIEL MONIZ				Contact Title MEMBER			
Street Address 411 DOUGLAS PIKE				City SMITHFIELD		State RI	Zip 02917
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.							
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 DANIEL MONIZ - MEMBER						Date 10-31-19	
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