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State of Rhode Island and Providence Plantations

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

2020 HAR 13 A 11: 42

Annual Report for the year:	2020
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						
001697661							
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island						
561720	We do Residental and Cometine Cleaning						
5. State of Formation							
KT							
6. Principal Office Address			City	State	Zip		
29 Victoria Ave			Cranston	RI	0920		
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person							
Contact Name			Contact Title  OWNEY				
Street Address 29 Victoria Are			Cranstan	State R +	Zip 527)		
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS							
Manager Name Ma			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							
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							
Jesus Caro			03-13-	-9090			
Signature of Authorized Person							
Asus are							

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 MAR 1 3 2020