	State of Rhode Island and Prov Office of the Secretar		ns Fee: \$50.0
	Division Of Business S	Services	
	148 W. River Str		
	Providence RI 02904		
HOPE	(401) 222-3040)	
Limited Liability Co Annual Report	mpany		
Filing Period: September	1 - November 1		
o file its annual report w	.L. 7-16-66(d), each limited liability compa ithin thirty (30) days after the time prescril a penalty fee of \$25.00.		-
ANNUAL REPORT YEA	R : <u>2019</u>		
1. ID No. <u>0016871</u>	.66		
2. Exact Name of the	Limited Liability Company C & C Ge	neral Construction L	<u>LC</u>
3. State of Formation			
State: DI			
State: <u>RI</u>			
Enter the six digit NAICS the list of codes <u>here.</u> M	ARTICLE III S Code that best describes the primary b lore information on <u>NAICS</u> can be found o		the entity. Download
Enter the six digit NAICS the list of codes <u>here.</u> M <u>236110</u>	S Code that best describes the primary b lore information on <u>NAICS</u> can be found o	nline.	
Enter the six digit NAIC the list of codes <u>here.</u> M <u>236110</u>	S Code that best describes the primary b	nline.	
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Enter the six digit NAICS the list of codes <u>here.</u> M <u>236110</u> 4. Brief Description of <u>ALL RESIDENTIAL</u> 5. Principal Office Add No. and Street: <u>125</u> City or Town: <u>MI</u> 6. Mailing Address of Contact Name: <u>LISA N</u> No. and Street: <u>24</u> City or Town: <u>NE</u> 7. Name and Address	S Code that best describes the primary b lore information on <u>NAICS</u> can be found o the Character of the Business Which i <u>CONTRACTING SERVICES</u> Iress <u>8 LAWRENCE STREET</u> <u>DDLETOWN</u> State Limited Liability Company and Name of <u>VEIGA</u> Contact Title: <u>ACCOUNTANT/Busicentre STREET</u> <u>EW BEDFORD</u> State: <u>M</u> of Each Manager of the Limited Liabil	nline. is Actually Conducter is RI Zip: <u>02842</u> or Title of Contact P <u>OOKKEEPER</u> <u>A</u> Zip: <u>02740</u> lity Company, if App	ed in Rhode Island Country: <u>USA</u> erson: Country: <u>USA</u>

Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

<u>UNITED STATES CORPORATION AGENTS, INC.</u> <u>222 JEFFERSON BOULEVARD, SUITE 200</u> <u>WARWICK</u>, <u>RI</u> <u>02888</u>

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 31 Day of March, 2020 at 3:49:56 PM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By CARLOS LOPEZ

Signature of Authorized Person

Form No. 632 Revised 09/07

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