-			
	State of Rhode I Office of the Secreta		Fee: \$50.00
	Division Of Business	Services	
	148 W. River St		
	Providence RI 0290 (401) 222-304		
HOPE	(401) 222-304	0	
Limited Liability Company			
Annual Report Filing Period: September 1 - November 1			
In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-			
16-66(b&c)) is subject to a penalty fee of \$25.00.			
ANNUAL REPORT YEAR: 2020			
1. ID No. <u>001679413</u>			
2. Exact Name of the Limited Liability Company <u>AAB Enterprises, LLC</u>			
3. State of Formation			
State: <u>RI</u>			
ARTICLE III			
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online. 236118			
4. Brief Description of the	e Character of the Business Which	is Actually Conduc	ted in Rhode Island
RESIDENTIAL AND COMMERCIAL CONTRACTOR			
5. Principal Office Addres	SS		
	ROYAL COURT MREPLAND State: P	$7 \sim 0.0064$	Country: LIC A
City or Town: <u>CU</u>	MBERLAND State: <u>R</u>	Zip: <u>02864</u>	Country: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
Contact Name: AARON I	BABIKIAN Contact Title: OWNER		
No. and Street: <u>12 F</u>	ROYAL COURT		
City or Town: <u>CUN</u>	<u>MBERLAND</u> State: <u>RI</u>	Zip: <u>02864</u>	Country: <u>USA</u>
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS			
Title	Individual Name	Ac	ldress
	First, Middle, Last, Suffix	Address, City or Towr	n, State, Zip Code, Country
8. RESIDENT AGENT IN R	HODE ISLAND - DO NOT ALTER		

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

AARON BABIKIAN <u>12 ROYAL COURT</u> <u>CUMBERLAND</u>, <u>RI</u> <u>02864</u>

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

Signed this 19 Day of September, 2020 at 5:20:13 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 AARON BABIKIAN

Signature of Authorized Person

Form No. 632 Revised 09/07

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