



State of Rhode Island

## Department of State - Business Services Division

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 R.I. DEPT. OF STATE TAMP  
 BUS SVCS DIV
Annual Report for the year: 2020

## Limited Liability Company

2020 SEP 30 AM 10:44

→ 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 <u>505025</u>		2. Exact name of the Limited Liability Company <u>PROVIDENCE LT CARENTRY WORKS LLC</u>	
3. NAICS Code <u>238350</u>		4. Brief description of the character of business conducted in Rhode Island <u>CARPENTRY DOORS MOLDING TRIM</u>	
5. State of Formation <u>RI</u>			
6. Principal Office Address <u>55 FARM ST</u>		City <u>PROVIDENCE</u>	State <u>RI</u>
		Zip <u>02908</u>	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name <u>LUIS VILLEGAS</u>		Contact Title <u>OWNER</u>	
Street Address <u>55 FARM ST</u>		City <u>PROVIDENCE</u>	State <u>RI</u>
		Zip <u>02908</u>	
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. The Resident Agent information currently of record with the RI Department of State is accurate. 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 <u>LUIS VILLEGAS</u>		Date <u>9/30/20</u>	
Signature of Authorized Person <u>[Signature]</u>			

FILED

SEP 30 2020

BY Q47HW

10:44

## MAIL TO:

Division of Business Services

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