

Department of State - Business Services Division

STAMP

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.

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Entity ID Number	Exact name of the Limited Liability Company				
00/690785	KMR TRUCKING, LLC				
3. NAICS Code	Brief description of the character of business conducted in Rhode Island				
484121	+RETGHT HAULING GARGO TRANSPORTATION				
5. State of Formation	+RETGHT HAUCING (MEGO PANSPOR TATION)				
21					
6. Principal Office Address			City	State	Zıp
1963 SMITH ST ZNFL			N. PROVIDENCE	121	11250
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name ROBERTO SANTANA			Contact Title Chuluca		
Street Address 1963 SMIM ST 2ND FL			CITY N. PROVINCESCE	State 721	Zip 029/1
8 List ALL managers (names and addresses) of the Limited Liability Company. IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name CoBonto SANTANA			Manager Name		
Street Address 1963 SHITM ST ZWO FC City PROVIDENCE State 12 225 11			Street Address		
N. PIZOVIDENCE	State 121	21p 25 11	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zıp
Check the box to indicate an attachment					
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				Date	<u>.</u>
ROBURTO SANTANA				10-13-2020	
Signature of Authorized Person					

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

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