State of Rhode Island and Providence Plantations
Department of State - Business Services Division

FILED
OCT 29 2020
BY 1235.08

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		
1666035	**18 Hope Street LLC**		
3. NAICS Code 236118	4. Brief description of the character of business conducted in Rhode Island **Purchase, sale rental, owner, production and sale of construction materials**		
5. State of Formation **Rhode Island**			
6. Principal Office Address **18 Hope Street**	City **Warren**	State **RI**	Zip **02885**
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name **Ann Carvalho**	Contact Title		
Street Address **171 Bay State Road**	City **Rehoboth**	State **MA**	Zip **02769**
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 ☐			
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 **Ann Carvalho**	Date 10-26-2020		
Signature of Authorized Person Ann Carvalho	10-26-2020		

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