	State of Rhode Office of the Secreta		Fee: \$50.00
	Division Of Business		
	148 W. River St		
	Providence RI 0290		
HOPE	(401) 222-304	10	
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>000992629</u>			
2. Exact Name of the Limited Liability Company <u>MEGA SOLUTIONS 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. <u>722513</u>			
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island			
RESTAUTANT AND CATERING			
5. Principal Office Addre	SS		
No. and Street: 71 I	HARKNESS ROAD		
	RTH SMITHFIELD State:	<u>RI</u> Zip: <u>02896</u>	Country: USA
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
Contact Name: Contact	Title:		
	IARKNES ROAD		
City or Town: <u>NOF</u>	<u>RTH SMITHFIELD</u> State:	<u>RI</u> Zip: <u>02896</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	Ad	dress
	First, Middle, Last, Suffix	Address, City or Town,	State, Zip Code, Country
8. RESIDENT AGENT IN F	RHODE ISLAND - DO NOT ALTER		

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

MICHAEL GRANDE 71 HARKNESS ROAD NORTH SMITHFIELD , RI 02896

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

Signed this 30 Day of October, 2020 at 9:18:39 AM 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 <u>MICHAEL GRANDE</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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