

## **Department of State - Business Services Division**

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.

FILED	577 37
OCT 2 9 2020 8	And the top

1. Entity ID Number 553616		2. Exact name of the Limited Liability Company B.S.A. TOYS, LLC					
3. NAICS Code 42 3 9 2 0	TO ENGA	4. Brief description of the character of business conducted in Rhode Island TO ENGAGE IN THE BUSINESS OF ACTING AS A MANUFACTURER'S AGENT AND REPRESENTATIVE IN TOY INDUSTRY					
5. State of Formation RHODE ISLAND							
6. Principal Office Address 2843 SOUTH COUNTY TRAIL #7			City EAST GREENWICH	State RI	Zip 02818		
7. Mailing Address of Lim		any and Name o			_		
Contact Name MICHAEL BEACHNAU			Contact Title MEMBER				
Street Address 2843 SOUTH COUNTY TRAIL #7			City EAST GREENWICH	State RI	<sup>Zip</sup> 02818		
8. List ALL managers (na	ames and addresse	s) of the Limited	Liability Company, IF APPLICABLE	- DO NOT LIST I	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	Zıp	City	State	Zip		
			C	heck the box to in	ndicate an attachment		
9. The Resident Agent in	formation currently	of record with the	e RI Department of State is accurate.	Changes require	e filing Form 642.		
Under penalty of perjur statements, and that all	y, I declare and aff statements conta	irm that I have ined herein are	examined this report, including an true and correct.	y accompanyin	g schedules and		
Name of Authorized Person				Date			
MICHAEL BEACHNAU			10-19-2020				
Signature of Authorized F	Person Beach	-ou					

## MAIL TO:

**Division of Business Services** 

148 W. River Street, Providence, Rhode Island 02904-2615

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