



State of Rhode Island  
**Department of State - Business Services Division**

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 R.I. DEPT. OF STATE  
 BUS SVCS DIV

2021 MAY -4 A 10: 26

**Annual Report for the year:** 2016  
**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 000160251		2. Exact name of the Limited Liability Company Reservoir Auto & Alignment Repair Service, LLC			
3. NAICS Code 811111		4. Brief description of the character of business conducted in Rhode Island AUTO ALIGNMENT AND REPAIR			
5. State of Formation Rhode Island					
6. Principal Office Address 60 RESERVOIR AVENUE		City Providence	State RI	Zip 02907	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Carlos Reyes			Contact Title Manager		
Street Address 60 RESERVOIR AVENUE		City Providence	State RI	Zip 02907	
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.					
<i>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.</i>					
Name of Authorized Person Carlos Reyes				Date 4/27/2021	
Signature of Authorized Person 					

**FILED**

**MAIL TO:**  
 Division of Business Services  
 148 W. River Street, Providence, Rhode Island 02904-2615  
 Phone: (401) 222-3040  
 Website: www.sos.ri.gov

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